

# EVALUATION AND STANDARDISATION OF UDAL ILAKKANAM CHARACTERISATION BASED ON SIDDHA CONCEPTS



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**DOCTOR OF MEDICINE**  
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**October – 2019**

## **DECLARATION BY THE CANDIDATE**

I hereby declare that this Dissertation entitled “*EVALUATION AND STANDARDISATION OF UDAL ILAKKANAM BASED ON SIDDHA CONCEPTS*” is a bonafide and genuine research work carried out by me under the guidance of **Dr.G.J.Christian M.D (S)**, Prof. HOD, Ph.D., Dept of Noi Naadal, National Institute of Siddha, Chennai – 47, and the dissertation has not formed the basis for the award of any other degree, Diploma, Fellowship or other similar title.

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## **BONAFIDE CERTIFICATE**

Certified that I have gone through the dissertation submitted by **Dr.Kalanidhi D (Reg.No: 321615204)** a bonafide student of final year M.D (S), Branch-V, Department of Noi Naadal, National Institute of Siddha, Tambaram Sanatorium, Chennai - 47, and the dissertation work has been carried out by the individual only. This dissertation does not represent or reproduce the dissertation submitted and approved earlier.

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## INDEX

SL.NO	CONTENTS	PAGE NO
1	INTRODUCTION	6
2	OBJECTIVES	8
3	REVIEW OF SIDDHA LITERATURE	9
4	SIDDHA PHYSIOLOGY	9
5	SIDDHA PATHOLOGY	10
6	DIETARY REGIMEN	37
7	MATERIALS AND METHODS	54
8	OBSERVATION AND RESULTS	58
9	DISCUSSION	113
10	SUMMARY AND CONCLUSION	121
11	BIBLIOGRAPHY	122
12	ANNEXURE	130

# INTRODUCTION

# **OBJECTIVES**

**REVIEW OF  
LITERATURE  
(SIDDHA)**

# **DIETARY REGIMEN**

**MATERIALS**  
**AND**  
**METHODS**

# **OBSERVATION AND RESULTS**



# DISCUSSION

# **SUMMARY AND CONCLUSION**

# **BIBLIOGRAPHY**

# **ANNEXURES**

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## 1 INTRODUCTION

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Siddha medicine is an eternal system which deals about the physical and psychological well-being of an individual. The great Siddhars in our system thus gave more importance to the physical body so as to attain salvation. The famous quote by Sage *Thirumoolar* is as follows

“உடம்பால் அழியில் உயிரால் அழிவர்  
திடம்பட மெஞ்ஞானம் சேரவும் மாட்டார்  
உடம்பை வளர்க்கும் உபாயம் அறிந்தே  
உடம்பை வளர்த்தேன் உயிர் வளர்த்தேனே”

- திருமந்திரம் <sup>[3]</sup>

For the purpose of practicing *Kayakalpam*, *Yogam* and various other techniques for keeping the body healthy and free from ailments, *Siddhars* elaborated about different methods. They have explained about the characterization of body in terms of *YakkaiIlakkanam* or *Prakriti*. The basics of Siddha medicine come under 96 *thathuvas*. *Siddhars* also explained eight-fold examination or *Ennvagai thervu* such as *Naadi*, *Sparisam*, *Naa*, *Niram*, *Mozhi*, *Vizhi*, *Malam* and *Moothiram*. These examinations are helpful for the diagnosis and prognosis of disease affected in an Individual.

The term disease is derived from the French word ‘*Desaise*’ which means inconvenience. In Siddha medicine total number of diseases are enumerated as 4448 in number. The ratio of *Vali*, *Azhal* and *Iyyam* in a normal healthy individual is 1: 1/2: 1/4. Disease occurs due to the vitiation of these three humours from the equilibrium state. Our body is made up of five elements (*panchaboothas*). *Vatham* which is made up of Air and Space elements is responsible for the actions and mobility, *Pitham* made up of Fire and Water elements is responsible for functions and processes of our body *Kabam* which is made up of Earth and Water elements is responsible for building the structure of Human body. The body constitution of an individual is the resultant of these three Vital humours. The body constitution prevails for one’s entire life time and cannot be changed or altered.

According to the Siddha system, every individual is born with his/her own basic physical and mental constitution termed as *Udal Ilakkanam* or *Thegi Iyal*. *UdaI*

*Ilakkanam* of a person which is capable of providing a fair indication of physical strengths and weakness, mental tendencies and susceptibility to illness of various types. The humour which is predominantly present during the fusion of *sukkilam* and *suronitham* (*Karuurpathi*) determines the *Thegi* of that particular individual. When the semen enters the female genital tract *Vaayu* and *Theyubhoothas* stand there to develop the growing embryo. *Vayu* will separate the seven physical constituents and three humours. The element *Appu* will protect from the heat produced by the combination of *Theyu* and *Vayu*, with its humidity. Amniotic fluid which has the property of *Theyu* and *Vayu* helps in the formation of organs in the body. Generally, *Vatha Thegi*, *Pitha Thegi* and *Kaba Thegi* are called as *Thooya udalinar* and combination of *Mukkutra Thegi* are called as *Kalappu udalinar* for all practical purposes.

*Thegi* examination is obviously cost effective and helps one to know oneself better and live a healthy and peaceful life. It helps to prevent diseases that are susceptible for a particular *Thegi* there by changing the life style and dietary regimen. In this study it was attempted to validate the clarifications of *Thegi* explained in the literature through patients and healthy volunteers with reference to the complaints, conditions and characters presented by them to their *Thegi* characteristics.

## 2: OBJECTIVES

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### 2.1. Primary Objective

- To carry out an open study of *Thegi* characterisation using *Sage Yugi's* concepts in healthy volunteers and patients visiting at NIS OPD and IPD.

### 2.2. Secondary Objective

- To develop and standardize *Thegi* characterisation based on statistical methods



### 3: REVIEW OF SIDDHA LITERATURE

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#### 3.A: SUGARANA NILAI IN SIDDHA MEDICINE (Siddha Physiology)

*Yakkai Ilakkanam* is one of the fundamental keys for diagnosis of the disease. It helps to find the physical and psychological aspect of an individual. The frame work of body constitution is imprinted on the embryo during the fusion of *sukkilam* and *suronitham* (*Karuurpathi*). The humour which is increased during the process of *Karuurpathi* prevails the confined somatotype.

உன்னிய கர்ப்பக் குழியாம் வெளியிலே

பன்னிய நாதம் பகர்ந்து பிருதிவி

வன்னியும் வாயுவு மாயுறுஞ் சக்கிலம்

மன்னிய சமனாய் வளர்க்கு முதகமே

- திருமந்திரம்<sup>[2]</sup>

When the Sperm enters the female genital tract, fusion occurs with the help of *Theyu* and *Vayu* element. The Uterine orifice closes immediately and the *Vayu* element protect the embryo like a driving force. The *Abanan* will protect the entrance. The *Udanan* helps in the growth of embryo.

Our body is made up of *Panchaboothas* namely *Prithvi*, *Appu*, *Theyu*, *Vaayu* and *Aakayam*. *Vatham*, *Pitham* and *Kabam* functionally resembling *Vayu*, *Theyu* and *Appu* element were seen in different ratios in a human being. This helps in the formation of *Vatha Thegam*, *Pitha Thegam* and *Kaba Thegam* as evidenced in the text *Athmartchamritham*.<sup>[14]</sup>

### 3.B SIDDHA PATHOLOGY

The three humours maintain the equilibrium of the human body through their combined functioning. When deranged, they bring about diseases' peculiar to their influence. The three humours mainly *Vatham*, *Pitham* and *Kabam* representing the *Air*, *Water* and *Fire* elements of the *Panchaboothas* which forms, the connecting link between Microcosm and Macrocosm. These are also the reasons for the inheritance character and genetic traits from parents.

“அண்டத்தி லுள்ளதே பிண்டம்  
பிண்டத்திலுளதே அண்டம்;  
அண்டமும் பிண்டமு மொன்றே  
அறிந்துதான் பார்க்கும் போதே”

- சட்டமுனி ஞானம் <sup>[2]</sup>

Diseases are formed due to the resultants of the karmas developed during one's lifetime. The predisposing factors are changing lifestyle and dietary regimen. Diseases are of two types.

*Udalpini*- derangement of *Mukkutram*

*Manapini*- derangement of *Mukkunam*

“சுக்கிலத்தில் சுரோணிதங் கலக்குமன்று  
பூந்திடும் வியாதி மூன்றும்”

- தன்வந்திரி நாடி <sup>[2]</sup>

The Sage *Dhanwanthari* says that diseases are formed on a living being during the fertilization of the embryo itself. It lies as a hibernated form in one's body. Whenever the individual changes from its correct dietary regimen and life style, the pertained diseases for each somatotype arises. There arises a scope for prevention of diseases. We can control the incidence of diseases to some extent by following dietary regimen.

### **Diseases in *VathaThegi*<sup>[11]</sup>**

- *Seethamvizhuthal*
- Abdominal distension
- *Vaayuthiratchi*
- *Kiraani*
- *Mahodharam*
- *Neeraamai*
- *Soolai*
- *Andavaatham*
- *Neerkirichiram*
- *Moolam*

### **Disease seen in *VathapithaThegi***

- *Uttinavaayu*
- *Vaanthi*
- *Seriyaamai*
- Belching
- Burning micturition
- *Thathunattam*
- *Thegaulaichal*
- Lethargic
- Tiredness of body
- Gunmam
- *Akkinimantham*
- Loss of taste

### **Diseases seen in *VathaKabaThegi***

- *Thimir*
- *Ulaichal*
- Cough
- Fever
- *Sanni*

- *Vedisoolai*
- *Rudrarogam*
- *Eelai*
- *Mantharakaasam*
- *Ulveechu*
- *Puraveechu*
- Oedema

#### **Diseases seen in *PithaThegi***

- Increased body temperature
- *Asthisuram*
- *Uttinavaayu*
- *Paithiyam*
- *Sobai*
- Burning sensation of body
- Lack of orientation
- Increased thirst
- Giddiness
- *Moorchai*
- Periodic fever
- Oedema
- *Moolam*

#### **Diseases seen in *PithakabaThegi***

- *Asthisuram*
- *Eelai*
- Yellowish discolouration of eyes, ear and stools
- Abdominal borboryness
- *Ulaimanthai*
- *Peenisam*
- *Rathaveekam*
- *Kaamaalai*
- *Sobai*

### **Diseases seen in *KabaThegi***

- *Kshayam*
- *Eelai*
- *Suvasakaasam*
- *Manthaarakaasam*
- *Sanni*
- *Suram*
- *Vishathodam*
- *Vikkal*
- *Rudrarogam*
- *Karappan*
- *Viranam*
- *Maradaippu*
- Increased sleep
- *Kaamalai*
- *Paandu*
- *Sobai*

**Diseases seen in *KabavathaThegi***

- Abdominal borboryness
- *Kanaththaveekam*
- *Saththivikkal*
- Body pain
- *Sanni*
- *Thodam*
- *Eelai*
- Cough
- *Paandu*
- *Sobai*
- *Soolai*
- *Pakkavatham*

**Diseases seen in *KabapithaThegi***

- Oedema
- *Kulirsuram*
- *Ulaichal*
- Cough
- Vomiting
- *Maradaippu*
- *Suvasam*
- *Vikkal*
- *Paandu*
- Diarrhoea

**Diseases in *Vatha Thegi* associated with increased body heat**

- Diarrhoea
- *Ulaichal*
- Menorrhagia
- *Agnimantham*
- *Karappan*
- *Rathapiremagam*
- *Neerkovai*
- *Soolai*

**Diseases in *Vatha Thegi* associated with increased *Vaayu***

- *Ullveechu*
- *Puraveechu*
- *Thimir*
- *Ananthavaayu*
- *Pakkasoolai*
- *Thudaikurukku*
- Pain in ribs, nuchal region, chest and nerves
- Dragging pain
- Pricking pain
- *Maaradaippu*

**Diseases in *VathaThegi* associated with increased chillness**

- *Ilaippuirumal*
- *Vali*
- *Sanni*
- *Thodam*
- *Kulirkaachal*
- *Viranam*
- *Vaanthi*
- *Mayakkam*
- Constipation
- Oedema
- *Soolai*
- *Paandu*
- *Thanurvaatham*
- *Pakkavaatham*
- Fatigue

**Diseases in *Pitha Thegi* associated with increased body heat**

- *Kayam*
- *Asthisuram*
- Vomiting

- *Gunmam*
- Diarrhoea
- Abdominal pain
- *Moolam*
- Bitter taste in tongue
- Night dreams
- *Paithiyam*
- Burning sensation in whole body
- Increased thirst

**Diseases in *Pitha Thegi* associated with increased *Vaayu***

- *Vali*
- *Gunmam*
- *Soolai*
- *Vaanthi*
- *Vikkal*
- Anorexia
- *Paithiyam*
- *Seriyamai*
- Sour belching
- Hepatic colic
- Chest pain
- Giddiness
- Tiredness
- *Thathunattam*

**Diseases in *Pitha Thegi* associated with increased chillness**

- Reduced appetite
- Anal pain
- Cough
- *Vaanthi*
- *Kulirsuram*
- *Kamaalai*



- *Sobai*
- *Oedema*
- *Naa vazhavazhappu*
- *Thodam*

**Diseases in *Kaba Thegi* associated with increased body heat**

- *Kshayam*
- *Irumal*
- *Suvasakasam*
- *Vippuruthi*
- *Naasirokam*
- *Yawning*
- *Vikkal*
- *Mantharakaasam*

**Diseases in *Kaba Thegi* associated with increased *Vaayu***

- *Gunmam*
- *Maradaippu*
- *Suvasakaasam*
- *Kuralkammal*
- *Naa vazhavazhappu*
- Increased salivary secretion
- Mucous mixed stools
- Pricking pain
- *Thimirvaatham*
- *Vali*
- *Izhuppu*
- *Paandu*

**Diseases in *Kaba Thegi* associated with increased chillness**

- *Suvasamaradaippu*
- *Moorchai*
- *Mayakkam*

- *Viyarvai*
- *Vikkal*
- *Sanni*
- *Thodam*
- Hiccup
- *Veechu*
- Abdominal borboryness

### **Curable and incurable diseases**

According to *Thridosha theory*, if the ratio of *Vatha*, *Pitha* and *Kaba* is getting doubled or reduced it results in the development of *Sanni*. If there is increased *pitham* in *kabam* and *kabam* in *vatham*, disease will be relieved in a short duration.

In persons with body constitutions such as *Vathapitham*, *Pithavatham*, *Pithakabam* and *Kabapitham* diseases get cured on taking medications.

In *Kabavatham* and *Vathakabam*, diseases are said to be incurable.<sup>[11]</sup>

## 4: REVIEW OF LITERATURE

*Yakkai Ilakkanam* or *Udal Iyal* is the basic characterization of the human body based on the three humours *Vatham*, *Pitham* and *Kabam*. These characterizations show particular predilection to a particular disease. So, it is essential to have a background knowledge about these body constituencies to know about the preponderances of the impending diseases in such individuals. Thereby a basal knowledge of these body constituencies plays a major role in influencing the diagnostic criteria based on Siddha system of medicine. It helps to get a clue about the diagnosis. In Siddha literature, it is mentioned that there is a special dietary regimen for each somatotype. We can also prevent the susceptible diseases pertaining to each body constitution by following the dietary regimen according to every season.

### Descriptions about the individual characteristics of different somatotypes

#### வாததேகியின் இலக்கணம்.

“கண்டாயோ வாதத்தா லெழுந்த தேகம்,  
கட்டிமையாய்த் தடித்திருக்குங் கருமை செம்மை  
வண்டாகுங் குழலாள்மே லற்ப ஆசை  
வாய்வுமிகும் போகமுறு மனஞ்சிக் கென்றல்  
உண்டாலே அற்பவுண்டி எரிப்போ டுண்ணு  
முறுதாது குறச்ச லுடம்புகளை வசிதம்  
பண்டோர்கள் நூல்முறையை நடக்கல் போதம்  
பாங்கான அறிவிசைத்தல் திண்ணந் தானே”

- சதகநாடி <sup>[1]</sup>

Persons with *Vatha* physique will be having hardness and thickness and dark or red skin, increased sexual desire, body pain and reduced appetite.

#### வாதபித்த தேகக்குறி:

“தானமுற வாதத்தில் பித்தஞ் சேர்ந்தால்  
சரீரகுறி மெலிவுநிறங் கருப்பே யாகும்  
ஈனமுறப் பொய்யுடனே மெய்யுஞ் சொல்லும்  
எரிப்புடனே துவர்ப்பதிக முண்ண வேண்டும்  
கானமருங் குழலார்மேல் மிகுந்த ஆசை  
கடிந்தமொழி முன்கோபங் காட்டு முள்ளம்  
ஆனவுடல் நெடிதலது குறித்த லாகும்  
அறிவுகுறைந் திருக்குமென அறிய லாமே”

- சதகநாடி <sup>[1]</sup>

Persons having *Vatha- pitha* physique would be slim, dark complexion, short tempered, talking truth and false together and has a liking for pungent and astringent tastes.

#### வாதஜய தேகக்குறி

“திண்ணமுறு வாதத்தில் சேத்துமஞ் சேர்ந்த  
தேககுண மதகரிபோல் நடக்குங் காயம்,  
வண்ணமுறத் தூலமதா முயர்ந்தமேனி,  
வார்த்தைஇடி போலாகும் யோக முண்டாம்,  
நிண்ணயமாங் கலைக் ஞானமறிவு முண்டாம்  
நேரிழைமேல் மிகவாசை நிறமே செம்மை  
உண்ணுவது புளிப்பெரிப்பு அதிகம் வேண்டும்  
உயர்ந்ததொரு காரஞ்சாரஞ் செய்வான்றானே.”

- சதகநாடி <sup>[1]</sup>

Persons having *Vatha - iyya* physique would have hard skin, high pitched voice, obese, reddish complexion, has a liking for sour and pungent tastes.

### பித்த தேகக்குறி

அறிவான பித்தத்தா லெடுத்த தேகம்  
அறமெலிவு நிறம்வெள்ளை அரிவை யோடு,  
பிரியாத சுகலீலை யற்பவுண்டி  
பெரும்புளிப் புண்வுகொள்ளல் பெரியோர் தம்மை  
குறியாத வாசாரம் பண்ணல் புத்தி  
குழம்பிப்பின் தேறல்கலை ஞான போதகம்  
நெறியாகக் கற்றறிவு சொல்லல் வீரம்  
நிலைப்புமதியில் க்கமதி யறவ மாமே”

- சதகநாடி <sup>[1]</sup>

Persons having *Pitha* physique have pale complexion, dry skin, reduced sleep, having respect to elders, learning all arts perfectly, confused mind, courageous and has a liking for sour taste .

### பித்தவாத தேகக்குறி

“உறவான பித்ததில் வாதஞ் சேர்ந்து  
உறத்தெழுந்த தேகமது பொதுநிறமே யாகும்  
நிறைவான குணங்கிருபை காட்சை வாமம்  
நேர்மைசுதி யன்குளிகை யோக மாய்கை  
மறவான கனவுநற் கந்தம் வேண்டும்  
வாய்ஞான மதிகப்புத்தி குயில்போல் வார்த்தை  
துறவான உடல்வறட்சி பசிபொறுமை யாகும்  
சூடெரிப்புப் புளிப்பதிக முண்ணுஞ் சொல்லை”

- சதக நாடி <sup>[1]</sup>

Persons having *Pitha-vatha* physique have pale or reddish complexion, likes fragrant articles, wise, voice resembling, frequent coughing, dry skin, has a liking for pungent and sour tastes.

### பித்தஜய தேகக்குறி

“சொல்லுகின்ற பித்தமதிற் சேத்துமஞ் சேர்ந்த  
சொருபமது செண்பகப்பூ நிறமே மேனி  
வல்லியர்மேல் மிகவாகை புளிப்பினிப் புண்ணும்  
வாக்கியங் குரலோசை மனத்திடமே யாகும்  
நல்லறிவு கற்கை முதியோரைப் பேணும்  
நடுநிலையே சொல்லுமதி யோக முண்டாம்  
பல்லுயிர்க்குந் தானிறங்கிக் கிருபை செய்யும்  
பாங்கான தருமமிகுந் திருக்குந் தானே”

- சதகநாடி <sup>[1]</sup>

Persons having *Pitha-iyya* physique have very melodious voice, moderate yoga practice, ungovernable lust, has a liking for sour and sweet tastes.

### ஜய தேகக் குறி

“தானான சிலேற்பனத் தாலெழுந்த தேகம்  
கனத்திருக்கு மனம்பெலெக்குஞ் சரீரம் வேர்க்கும்  
மானார்மேல் மயலாகுஞ் சிவந்த மேனி  
வானிடி போற் குரலாகும் வணக்க மாகும்  
ஆனாலோ பொய்யதை மெய்யா யுரைக்கும்  
அறப்புசிக்குந் தித்திப்போ டுண்ணுங் கைகால்  
ஊனாகக் கசிந்திருக்குங் காசங் கச்சல்  
உண்டாகு மென்றுமுன்னோ ருரைத்த வாரே”

- சதகநாடி <sup>[1]</sup>

Persons having *Iyyam* physique will have the following characters:

- Reddish complexion
- Increased sweating
- Capacity to camouflage lies as truth
- Plumpy body
- Has a liking for sweet taste
- High pitched voice

### ஐயபித்த தேகக்குறி:

“வாறான சிலேற்பனத்தில் பித்தஞ் சேர்ந்தால்  
வளர்கோரோ சனைநிறமா மேனி தானும்  
வீறான புளிப்பிணிப்பு மெத்த வேண்டும்,  
மெய்ரோமம் சிவப்புவெடிக் குரலே யாகும்  
பேறான சத்தியமொழி பொய்சொல் லாமை,  
பிற்பலனாம் யோகமுண்டாம் பேதை யோடு  
கூறான மையல்விளை பண்புகழ்ச்சி வீரம்  
கொண்டுமனத் திடத்தன்னெனக் குறிக்க லாமே”

- சதகநாடி <sup>[1]</sup>

### Characters of mixed physique of Iyyam and Pitham

- Body will be reddish or greenish
- Reddish hairs on the body
- Cracked voice
- Courage
- Has a liking for sweet and sour tastes

### ஐயவாத தேகக் குறி:

“குறிக்கின்ற சிலேற்பனத்தில் வாதம் பற்றில்  
கண்டெழுந்த தேகமது தூல காயம்  
பிறிக்கின்ற உடல்கறுமை செம்மை யாகும்  
பெருகுகட வுண்டிபுளிப் பெரிப்போ டுண்ணும்  
மறிக்கின்ற பெண்ணாசை வீரம் யோகம்  
வாழ்க்கைக்கவி தான்வித்தை மறைநூ லாய்தல்  
நெறிகொண்ட பெரியோரைப் போற்ற லன்பு  
நேசமுறுஞ் சிலேற்பனத்தில் வாத மாமே”

- சதகநாடி <sup>[1]</sup>

**Persons with *Iyya-vatham* physique have the following characters:**

- Rough skin
- Dark or red complexion
- Increased sexual desire
- Learn yoga practice
- Protect elders
- Research in several arts and science
- Has a liking for sour and pungent tastes

**Udal Ilakkanam mentioned in Yugivaidyachinthamani**

“கொள்ளவே வாதத்தின் ரோகந்தானும்  
குளிர்ந்துமே சிறுதிடத்தே யுஷ்ணமாகித்  
தெள்ளவே துடிதுடித்தே யிருக்கும் பித்தம்  
தேகந்தா னதிகவுஷ்ணமாயிருக்கும்  
தெள்ளவே சேட்டுமத்தின் ரோகந்தானும்  
சிக்கென்று குளிர்ந்திருக்கு ந்தொந்த தேகம்  
பன்னவே பலவிதந்தான் பெற்றிருக்கும்  
பரிந்து தொட்டு தேகத்தைப் பார்த்துச் சொல்லே” [3]

The inherent body temperature presented in *Vali*, *Azhal*, *Iyyam* and *Thontha Thegis* are mild warmth, increased warmth, chill and varying temperatures respectively.

**நிறப்பரிட்சை**

“தேகத்தினிறந்தானுஞ் செப்பக் கேளிர்  
சிறுமையாய் வாதந்தான் கறுத்திருக்கும்  
போகத்தின் பித்த நிற மஞ்சளாகும்  
பொருஞ்சேட்ப ரோகிக்கு வெளுப்புமாகும்  
பாகத்தின் தொந்தரோகிக்குத் தானும்  
பலபலவர்ண முமாகிப்பற்றது நிற்கும்  
ஆகத்தினிறம் பார்த்து நாடி பார்த்து  
அஷ்டவிதப் பரிட்சையெல்லாம் டவாய்ப்பாரே” [3]

The inherent complexion of *Vali* , *Azhal* and *Iyyam* physical constituents of the individuals are dark, wheatish and fair respectively.



### வசனப்பரிட்சை

“பார்வாதரோகிக்கு வார்த்தை தானும்  
பக்குவமாயச் சட்டதமா யிருக்கும்  
பேர்பித்த ரோகிக்கு வார்த்தை தானும்  
பேசிடிலோ பெலததுமே பருத்திருக்கும்  
சேர்சேட்ப ரோகிக்கு வார்த்தை தானும்  
சிறுததுமே யீனசுரமாயிருக்கும்  
வேர்தொந்த ரோகிக்கு வார்த்தை தானும்  
வெகுவிதமா யிருக்குமென்றே விரித்திடாயே” [3]

The characteristic pitch of voice in *Vali*, *Azhal*, *Iyyam* and *Thontha Thegi* are bass, shrill and mixed respectively.

### நேத்திரப்பரிட்சை

“விரித்திட்ட வாதமென்ற ரோகிக்குத்தான்  
மீறியே கண்கறுத்துத் தண்ணீர்பாயும்  
பரித்திட்ட பயித்திய ரோகிக்குக்கண் தான்  
பச்சென்று சிவந்திருக்குஞ் சேட்பரோகி  
பிரித்திட்ட பீளைசாரும் வெளுத்திருக்கும்  
பெருஞ்சன்னி வாதரோகிக்குக் கண்தான்  
கரித்திட்டுச் சிவந்துபச் சென்றிருக்குங்  
காமாலை ரோகிக்கு பசுமஞ்சளாமே” [3]

In *VathaThegi*, eyes are dark and watery.

In *PithaThegi*, eyes are red and suffused.

In *KaphaThegi*, eyes are white and rheumy.

In *Sanni noi*, the color of the eyes is a mixture of black, red and greenish tinge.

In *Kamalai noi*, eyes resemble the color of “*pasumanjal*”.

### மலப்பரிட்சை

“மஞ்சளென்ற வாதரோகிக்கு மலந்தானும்  
மலபந்தமாகியே கறுத்திருக்கும்  
பிஞ்சலென்ற பித்தரோகிக்குத் தானும்  
பொருகியே வெச்சென்று சிவந்திருக்கும்  
திஞ்சலென்ற சேட்டுமரோகிக்குத் தானும்  
சிகறிமலம் வெளுத்துமே சீதமாகும்  
பஞ்சலென்ற தொந்தரோகிக்குத் தானும்  
பலவர்ண மாயிருக்கும் பண்புதானே” [3]

- In *Vatha Thegi*, stools are dark in colour and constipated.
- In *Pitha Thegi*, stools are reddish.
- In *Kapha Thegi* stools are pale.
- In *Thontha Thegi* stools are of assorted colors.

### ஜலப்பரிட்சை

“பண்பான வாதரோகிக்கு மூத்ரம்  
பாரித்துத் தெளிந்திருக்கும் வெண்மையாகும்  
மண்பான பித்தரோகிக்கு மூத்ரம்  
மார்க்கமாய் மஞ்சளித்துப் பசந்திருக்கும்  
திண்பான சேட்டுமரோகிக்கு மூத்ரம்  
சேறுபோற் பொருமியே நுரைந்ததிருக்கும்  
கண்பான தொந்தரோகிக்கு மூத்ரம்  
கண்ட பல நிறமாகும் கருதிடாயே” [3]

- In *Vatha Thegi*, urine is clear and light coloured.
- In *Pitha Thegi*, urine is yellow and sticky.
- In *Kapha Thegi*, urine is murky and frothy.
- In *Thontha Thegi*, urine is of assorted colors.

### நாவின்பரிட்சை

“கருதியே வாதரோகிக்கு நாக்கு  
கறுத்திருக்கு முள்ளுபோல் வெடித்திருக்கும்  
பருதியே பித்தரோகிக்கு நாக்கு  
பச்சென்று தானிருக்குச் சிவந்திருக்கும்  
வெருதியே சேட்டுமரோகிக்கு நாக்கு  
வெளுத்துமே தண்ணீருண்டாயிருக்கும்  
துருதியே தொந்தரோகிக்கு நாக்கு  
சூட்சாதி பலவர்ணமாகுந்தானே” [3]

- In *Vatha Thegi*, tongue is dark, furred and fissured.
- In *Pitha Thegi*, tongue is reddish.
- In *Kapha Thegi*, pale tongue with increased salivation.
- In *Thontha Thegi*, assorted colours are seen.

### ThanthaParitchai mentioned in Sikitcharathinadeepam

- In *Vatha Thegi*, teeth would be darkened and ash coloured
- In *Pitha Thegi*, teeth would be yellow tinged
- In *Kapha Thegi*, teeth would be brighter white in colour.
- In *Thontha Thegi*, teeth would be of assorted colours

### Development of body according to Atmaratchamritham<sup>[14]</sup>

Our body is made up of *Panchaboothas* namely *Prithvi*, *Appu*, *Theyu*, *Vaayu* and *Aakaayam*. *Vatham*, *Pitham* and *Kabam* functionally resembling *Vaayu*, *Theyu* and *Appu* elements seen in different ratios in a human being. Humour which is increased during *Karuurpathi* (fertilization) results in the respective somatotypes of that offspring. This is the intricacy pertaining to the genesis of *Vathathegam*, *Pithathegam* and *Slethmathegam*.

### **Signs of Vathathegi**

- Gentle pulsations of *Naadi*
- Tiredness of body
- Dull headedness
- Constipation
- Decreased digestive power
- Increased yawning
- Decreased *suronitham* formation
- Decreased sexual desire.
- Slack in tasks
- Ever earnest in spoken words
- Keeps bluffing around for vain glory
- Cool and plumpy body

### **Signs of Pithathegi**

- Accelerated pulse
- Achieves tougher tasks through stable mind and assertiveness
- Increased strength
- Premature greying of hair
- Suffused at the tail of the eye
- Words are sweet as honeycomb
- Increased sexual desire
- Increased body heat
- Examination of literature to discern the facts

### **Signs of Kabathegi**

- Reactive pulse play
- Decreased strength
- Increased sweating
- Desire to be of exemplary integrity
- Indulgence in sex
- Shunning falsehood
- Long hair growth
- Mockery

## **YakkaiIlakkanam according to Sikitcharathinadeepam**

In *Sikitcharathinadeepam*, 9 types of body constitutions are described

### **Signs of *Vathathegam***

- Swelling
- Heaviness
- Body: black or red complexion
- Increased *Vaayu* formation in the body
- Lust and infatuations
- *Thathunattam*
- Tiredness
- Indigestion

### **Signs of *Vatha-PithaThegam***

- Lean body
- Black complexion
- Mixing falsehood with truth
- Promiscuity
- Foolishness
- Unrestrained temper
- Has a liking for pungent and astringent taste

### **Signs of *Vatha-Kapa thegam***

- Swelling
- Staggering like a mad elephant
- Red complexion
- Lusting after women/womaniser
- Mastery over many arts
- Has a liking for sour and pungent taste
- Imbibing the nature of penance

### **Signs of PithaThegam**

- White complexion
- Dryness of body
- Increased sexual desire
- Reduce appetite
- Reduced sleep
- Respect elders
- Confused mind
- Has a liking sour taste
- Mastery over many arts

### **Signs of Pitha- Vathathegam**

- Red or white complexion
- Has a liking for sweet fragrance
- Intellectual ability
- Melliflous voice
- Dry provoking cough
- Dryness of body
- Has a liking for pungent and sour taste

### **Signs of PithaKaphathegam**

- Colour of the body resembles *shenbaga flower*
- Sweet voice
- Very respect to teachers
- Promiscuity
- Balanced practise of *Yoga*
- Intention to salvage souls

### **Signs of *Kabathegam***

- Red complexion
- Fatness
- Infatuation/Lust
- Modesty
- Camouflaging lies like truth
- Has a liking for sweet taste
- Increased sweating

### **Signs of *Kaba Pitha thegam***

- Red or green complexion
- Red coloured body hairs
- Cracked voice
- Principles of truth
- Has a liking for sweet and sour tastes

### **Signs of *KabaVathaThegam***

- Swelling
- Black or red complexion
- Respects elders
- Has a flair for many arts
- Balanced practise of *Yoga*
- Brave
- Has a liking for sour and pungent tastes

## 5: DIETARY REGIMEN

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Dietary regimen plays a major role in maintenance of health. It reflects in the physical and psychological aspect of a living being. *Siddhars* explained about dietary regimen on the basis of everybody constitution. One who follows this dietary regimen can prevent the susceptible diseases pertaining to each body constitution.

### வளி முதலிய மூவுடலினர்க்கும் உப்பு வகை

“வாதபித்தை யென்றே வருவதேகர்க் குக்கல்லுப்

போதவுப்பிந்துப்பாம் உணர்முறையே - ஓதவெள்ளம்

வற்றியஇந்துப்பதன வாதமுத லோருந்தக்

குற்றமிலை குற்றமிலை கூறு”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

*Vathathegi : Kalluppu*

*Pithathegi :Kadaluppu*

*Kabathegi :Induppu*

### வளி உடலினர்க்குக் கறி வகை

“மாட்டுப் பரங்கிவங்கம் மாமுருங்கை வெள்ளவரை

நாட்டுக்கூ ரப்பிஞ்சு நற்கருணை - காட்டுஞரை

மாகருணை யுங்கருவில் வாதத்தை முந்துவந்த

தேகருணை நற்கறியாந் தேர்”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>



### Dishes to be taken by VathaUdalinar

*Saambalpoosani*

*Kaththari*

*Paagal*

*Karunaikizhangu*

*Murungai*

*Avarai*

### வளி உடலினர்க்குக் கீரை வகை

“மேனிமுன்னை யாரைநறும் வேளைமணத் தக்காளி  
யானைநெருஞ் சில்முசுக்கை யப்பைநெடுங் - கானிலுறை  
மூக்கிறட்டை நல்வசலை முன்பிவைக ளிற்கீரை  
யாக்குவர்வா யுத்தேர்க் காய்ந்து”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

### Greens to be taken by VathaUdalinar

*Munnai*

*Manathakkaali*

*Yaanainerunjil*

*Musumusukkai*

*Mookkirattai*

*Kuppaimeni*

*Velai*

### வளி உடலினர்க்குக் இரச வகை

“சக்கர வர்த்திவெள்ளைச் சாரடை பாகல்முருங்கை  
தொக்கிலிளந் தண்டுநறுந் தூதுணம்வார் - மைக்குழலே  
சீதமுறு காணியிவை செந்தளிர்க ளிற்றனமும்  
வாததே கர்க்கிரசம் வை”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

**Rasam to be taken by Vathaudalinar**

*Vellaichaaradai*

*Murungai*

*Paagal*

*Thoothuvalai*

**வளி உடலினர்க்கு வற்றல் வகை**

“சுண்டைக்காய் பேய்ப்புடற்காய் தூதுளங்காய் நெல்லிக்காய்  
தொண்டைமணத்தக்காளி தூஅவரை - பண்டைமுள்ளிக்  
காயிவையின் வற்றல்களுங் கான்பிரண்டை வற்றலுமாம்  
வாயுதே கர்க்கறிந்த வை”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

**Salted and dried vegetables for VathaUdalinar**

*Chundaikkai*

*Peippudalkkai*

*Thoothuvalamkaai*

*Nellikai*

*Aathondai*

*Manathakkaali*

*Thuvarai*

*Mullikkai*

*Pirandai*

**வளி உடலினர்க்கு ஊறுகாய் வகை**

“நாரத்தை தான்றிகடு நற்றேற்றான் நீடுகளா  
ஏரொத்த புன்களாலி வ்வகைக்காய் - காருப்பப்  
பூறியகாய் ஆகும் உயிரிஞ்சி யும்மையுங்  
கூறனில தேகிகளுக்கு”

- பதார்த்த குண சிந்தாமணி<sup>[2]</sup>

### **Pickles for VathaUdalinar**

*Naarathai*

*Thantri*

*Kaduku*

*Thetran*

*Inji*

*Kalakkai*

**பித்த உடலினர்க்குக் கறி வகை**

“வெள்ளரி இரண்டு பாகல் விரிபுடல் பீர்க்குச் சிம்பை

முள்ளிபூ சினிகத்தாரி முருங்கைமா களவ ரம்பை

எள்ளிலிக் காய்கள் வள்ளி ஈருள்ளி கதலிப் பூதண்

டள்ளியுண் ஆணஞ்செய்வர் அரும்பித்த தேகர்க் கென்றே”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

### **Dishes to be taken by PithaUdalinar**

*Vellari*

*Paagal*

*MithiPaakal*

*Pudalankkai*

*Peercku*

*Murungai*

*Maa*

*Kathalipoo*

*Eerulli*

*Simbai*

*Mulli*

*Poosani*

*Kathirikkai*

*VaazhaiThandu*

### பித்த உடலினர்க்குக் கீரை வகை

“புளியாரை கோவை முருங்கை வசலைநற் பொன்முகட்டை  
மிளகப்பை யோரிதழ்த் தாமரை பாலை வெளிமு சுக்கை  
வளர்தூ துணஞ்சுரை வல்லாரை சில்லி மணத்தக்காளித்  
தளிரிளங் கீரைகள் பித்த தேகிகள் தாமுண் பாரே”

- பதார்த்த குண சிந்தாமணி<sup>[2]</sup>

### Greens to be taken by pithaudalinar

*Puliyaarai*

*Kovai*

*Murungai*

*Vasalai*

*Ponmusuttai*

*Milagappai*

*Orithazhthaamarai*

*Musukkai*

*Vallaarai*

*Sirukeerai*

*Manathakkaali*

*Thoothulamkkai*

### பித்த உடலினர்க்குரச வகை

“கொத்து வசலை கொடிவசலை நல்லகத்தி

தத்து புனல் வழுக்கை தைவேளை - நெய்த்ததராச்

சாகங் களையவித்துச் சாறுவைத்துண் பார்பித்த

தேகங் களையுடையார் தேர்”

- பதார்த்த குணசிந்தாமணி<sup>[2]</sup>

### **Rasam to be taken by Pithaudalinar**

*Vasalai*

*Thaivelai*

*Kodivasalai*

*Agathi*

*ThennamVazhukkai*

*Velai*

*Tharakkeerai*

### **பித்த உடலினர்க்கு வற்றல் வகை**

“சுத்தமுள்ளி பேய்ப்புடோல் தூதுணங்காண் சுண்டைகண்டங்

கத்தரி பயற்றைமணத் தக்காளி - நித்தமுறு

கஞ்சம்வல் லாரையிவை காய்த்தநறுங் காய்வற்றல்

விஞ்சுபித்த தேகிகட்காம் விள்”

- பதார்த்தகுணசிந்தாமணி <sup>[2]</sup>

### **Salted and dried vegetables for Pithaudalinar**

*Mulli*

*Peipudal*

*Chundai*

*Kandamkathiri*

*Manathakkaali*

*Vallarai*

*Thoothulam*

### **பித்த உடலினர்க்கு ஊறுகாய் வகை**

“ பச்சை மிளகிஞ்சி தூதுளங் காய்முப் பலநரத்தங்

கச்சை தமரத்தம் புன்னை வடங்கபித் தம்மிலமா

கொச்சையி ளம்பிஞ்சு மாகாளிக் கந்தங் கொளுஞ்சியெலு

மிச்சையுப் பூறிய காய்பித்த தேகர்க்கு மிக்குநன்றே”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

### **Pickles for pithaudalinar**

*Milakai*

*Inji*

*Thoothuvalai*

*Thamarathamkaai*

*Punnai*

*Kozhunji*

*Elumichai*

*Muppalam*

*Naarathamkkai*

*Maampinju*

*Marvallikizhangu*

### **ஐய உடலினர்க்குக் கறி வகை**

“கத்தரிபேய்ப் புடலவரை யிருபாகல் பருங்களா கண்டங்காரி  
அத்திக்காய் களும்வருக்கை மாபயற்றை கரையால்பீர்க் கரும்பிஞ்சுவேர்  
மொய்த்த சூரணங்கதலித் தண்டுகளப் பூமுள்ளங்கி முருக்கரும்பும்  
அத்திபூ சினிக்காய் ருள்ளிவள்ளி யுங்க்கபத்தோர்க் காண்மாமே”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

### **Dishes for KabaUdalinar**

*Kaththari*

*Peipudal*

*Avarai*

*Paagal*

*Kandamkathiri*

*Athikkai*

*Maa*

*Vazhaithandu*

*Poosanikkaai*

*Eerulli*

*Palaa*

*Karunaikizhangu*

*Peerkampinchu*

*Kalaapoo*

*Mullanki*

*Murungaipinchu*

### **ஐய உடலினர்க்குக் கீரை வகை**

“காரையிரு கோவைமுன்னை செம்பைபடோல் துயிலி வழக்கைநெருஞ்சில்  
ஆரைபுளி யாரைமுல்லை மருதநெய்தல் மேனிநல்வல் லாரை பொன்னா  
வாரைமுசுக் கைமுருங்கை யிருபிண்ணாக் கோடுபண்ணை மணலி பிள்ளைக்  
கீரைமுசுட்டை யுங்காராமணிமாடங் கடலைபுளிக் கிரிக்களாவே”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

### **Greens forKabaUdalinar**

*Kovai*

*Munnai*

*Sembai*

*Nerunjil*

*Puliyaarai*

*Aarai*

*Kuppaimeni*

*Vallaarai*

*Ponnaavarai*

*Musukkai*

*Murungai*

*Thuyilivazhukkai*

*Mulaikkeerai*

*Pinnaakkukeerai*

*Manalikkeerai*

*Musuttai*

*Kaaramani*

*Kadalaipulippu*

*Chukku*

*Kattazhai*

*Vasalai*

**ஐய உடலினர்க்கு இரச வகை**

“கந்தஓ மஞ்செங் கடுசுத குப்பைதரா

வெந்தியங் கொத்துமல்லி வேளை சுக்கு - முந்தகத்தி

தூறுகுறிஞ் சாபாகல் தும்பையிச்சாகங்கள் வெந்த

சாறுகப தேகர்க்காஞ் சாற்று”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

**Rasam for KabaUdalinar**

*Thiraaai*

*Kadugu*

*Sathakuppai*

*Tharaa*

*Venthayam*

*Kothumalli*

*Chukku*

*Paagal*

*Thumbai*

*Omam*

*Venthayam*

*Agathi*



**ஐய உடலினர்க்கு வற்றல் வகை**

“சுண்டைமணத் தக்காளி தூதுணம்பு ரண்டையா  
தொண்டைமுள்ளி பேய்ப்புடலை தொண்டைசிம்மை - கண்டையுறு  
கத்தரிநெல் லிப்பிஞ் சுகாநரத்தம் பிஞ்சிவைகள்  
ஓத்த வற்றல் ஐத்தேகர்க்குன்”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

**Salted and dried vegetables for KabaUdalinar**

*Chundai*

*Manaththakkali*

*Pirandai*

*Mullikeerai*

*Peippudal*

*Kaththari*

*Nelli*

*Avarai*

*Thoothulam*

*Pirandai*

*Aathondai*

*Naaratham*

**ஐய உடலினர்க்கு ஊறுகாய் வகை**

“மஞ்சள் மிளகுசுண்டை வாழைத்தண் டோடுமாம்  
பிஞ்சாலம் பிஞ்சத்திப் பிஞ்சுகளும் - விஞ்சுகபம்  
நூறுநறுந் தூதுணமு நொய்யபா கற்பிஞ்சும்  
ஊறுகாயைத் தேகர்க் கோது”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

### **Pickles for KabaUdalinar**

*Manjal*

*Milagu*

*Chundai*

*Vazhaithandu*

*Athipinju*

*Aalampinju*

*Maampinju*

*Paakalpinju*

*Thoothulam*

*Paagal*

### **காலம் , உடல் ஆகும் ஆகா பதார்த்தங்கள்**

“எல்லாக் கறிகளுமே யெல்லுக்கா மல்லுக்கா

மெல்லாக் கறிகளுமெல் லார்க்குமாம் - பொல்லாக்

கறிகளுக்குச் சத்துருக லந்தமைந்து நன்றாங்

கறிகளுக்குள் வைத்துருந்துங் கால்”

- பதார்த்த குண சிந்தாமணி <sup>[2]</sup>

## **6: MATERIALS AND METHODS**

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### **6.1. Study type**

Observational type of study

### **6.2. Study design**

An open single centric clinical trial

### **6.3. Study place**

- Outpatient department and inpatient department,  
AyothidossPandithar Hospital  
National institute of Siddha,  
Chennai-47

### **6.4 Study Period**

24 Months

### **6.5. Population and Sample:**

- **20-70** age groups fulfilling all the inclusion criteria and passing the exclusion criteria mentioned below
- The sample consists of healthy volunteers and patients attending the OPD and IPD of Ayothidoss Pandithar Hospital, National institute of Siddha.

### **6.6. Sample size**

- Total: 300
- Healthy volunteers: 150
- Patients: 150

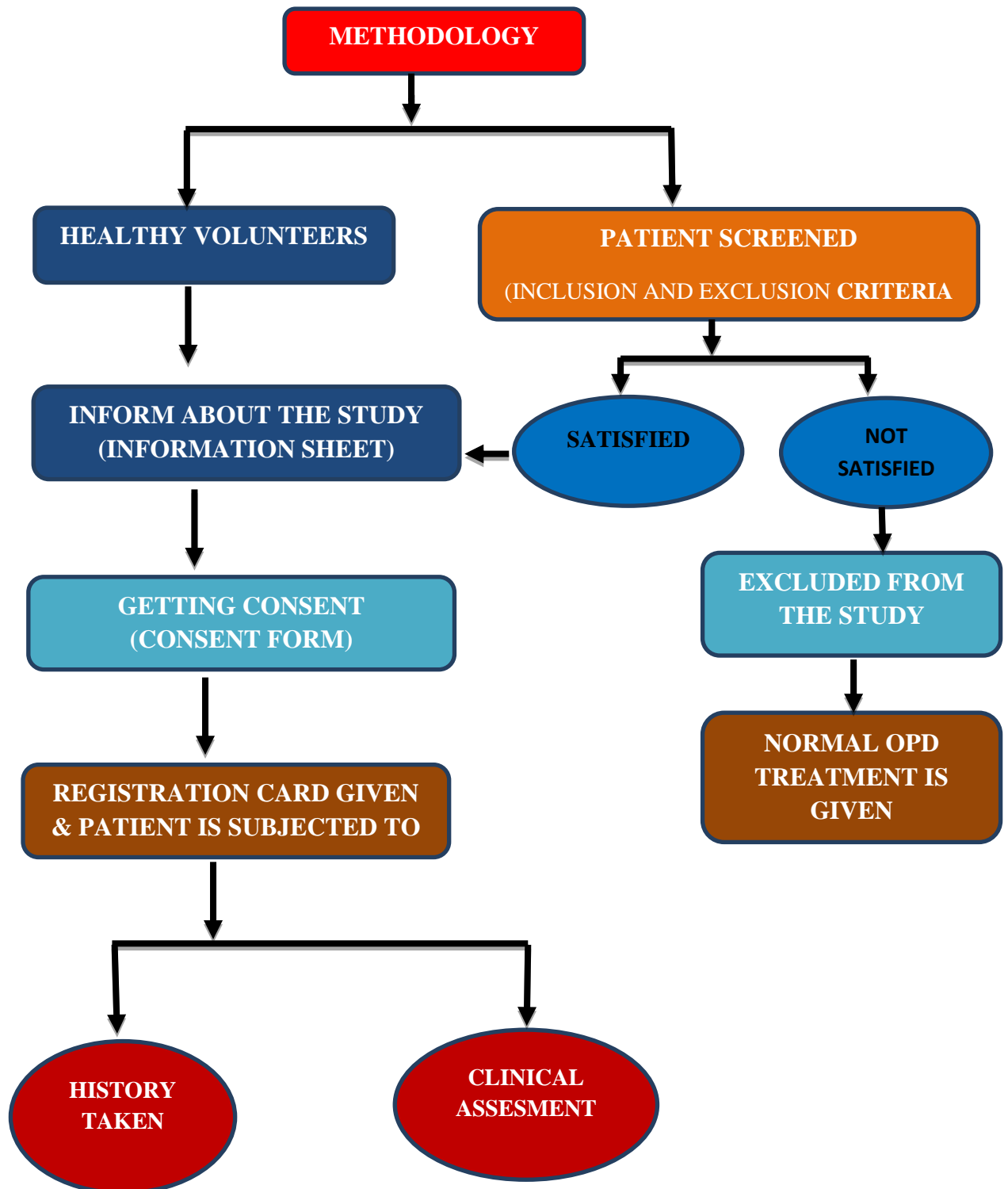
### **6.7. Selection criteria**

#### **6.7.a) Inclusion criteria**

- Age 20-70
- Healthy volunteers
- NIS OPD and IPD patients

### 6.7.b) Exclusion criteria

- Mentally retarded patients
- Vulnerable groups
- Severely ill patients



## **6.8. Conduct of study**

- Patients between 20 age and 70 age will be included.
- Informed consent in writing would be obtained from the patient and subjects.
- Prepared questionnaire with particular score from Siddha literature (Noinadal : I) for each Dhegi will be filled up by principal investigator for each patients.
- Then the patients would be subject to analysis of specific Dhegi features and documented for the frequency of features.
- Thegi scoring method would be evolved through statistical methods.

## **6.9. DATA COLLECTION**

Case record form

Annexure I: Screening and selection proforma

Annexure II: History proforma

Annexure III: Clinical Assessment Form

Annexure IV: Informed Written Consent Form

Annexure V: Patient Information Sheet

## **6.10 Data management**

- After enrolling the patient in the study, a separate file for each Thegi would be opened, such as 9 files will be opened with each Thegi name enrolled above the file for easy identification and arranged in a separate rack at the concerned OPD unit.
- The data recordings will be monitored for completion and compliance of patients by HOD and Sr. Research officer (Statistics). All forms will be further scrutinized in presence of investigators by Sr. Research officer (Statistics) for logical errors and incompleteness of data before entering onto computer to avoid any bias. No modifications in the results are permitted for unbiased report.
- All collected data will be entered using MS access software onto computer.

### **6.11. Statistical analysis**

Score would be calculated according to the marks given for each question. All the filled data in the questionnaire would be entered in the computer

### **6.12. Ethical Issues**

- Patients would be examined and screened in an unbiased manner and would be subjected to the criteria.
- Consent would be obtained from the patient in written format, explaining in the understandable language to the patient.
- The data collected from the patient would be kept confidentially
- Patient would be explained about the particulars in the study
- Normal treatment procedure followed in NIS hospital would be prescribed to the study patients and the treatment would be provided at free of cost.
- There would be no infringement on the rights of the patient.

## 7: OBSERVATION AND RESULTS

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### 7.1 AGE DISTRIBUTION

**Table-1 Age Distribution**

Sl.No	Age distribution	No of cases	Percentage
1	20 -30	100	33
2	31 – 40	29	10
3	41 -50	43	14
4	51 – 60	51	17
5	61 -70	77	26

### **AGE DISTRIBUTION**

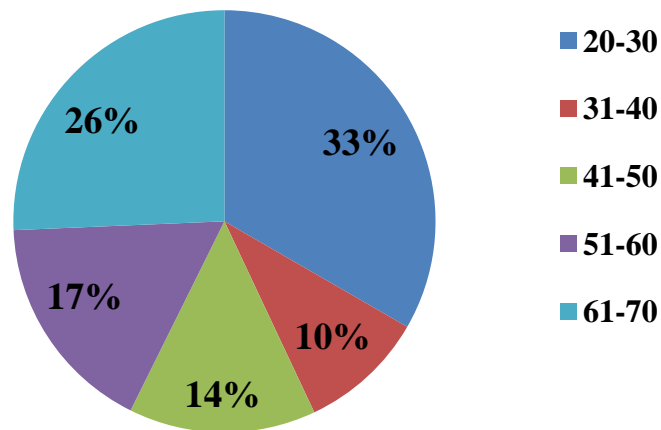


Fig 1 Age Distribution

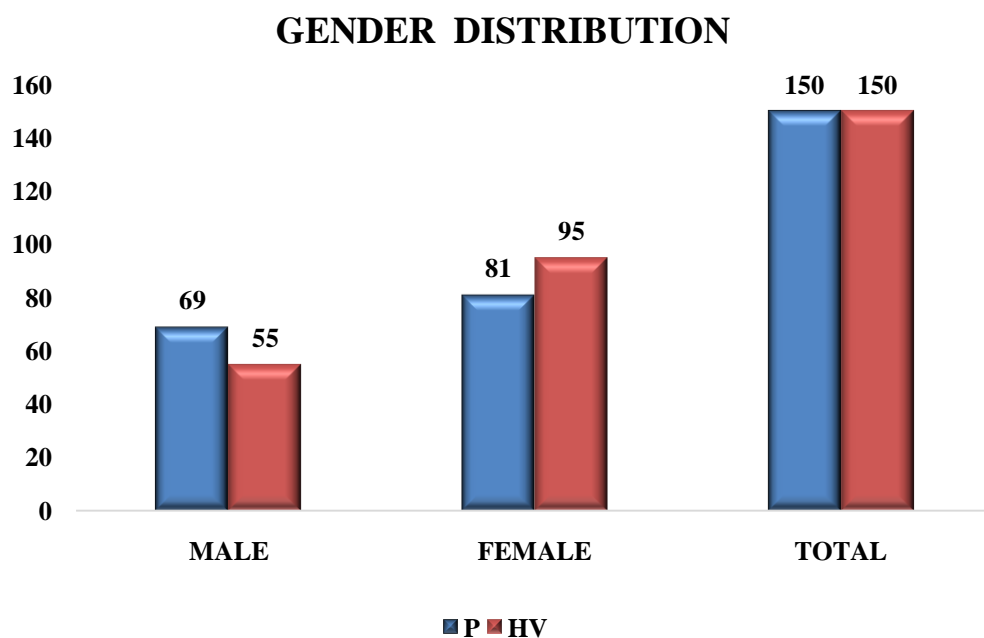
### Observation

Among 300 cases ,100 cases (33%)belonged to the 20-30 age category, 29 cases (10%)belonged to 30-40 category,43 cases (14%)belongedto 40 -50 category,51 cases (17%)belonged to 50-60 category and 77 cases (26%)belonged to 60-70 category.

## **7.2 GENDER DISTRIBUTION**

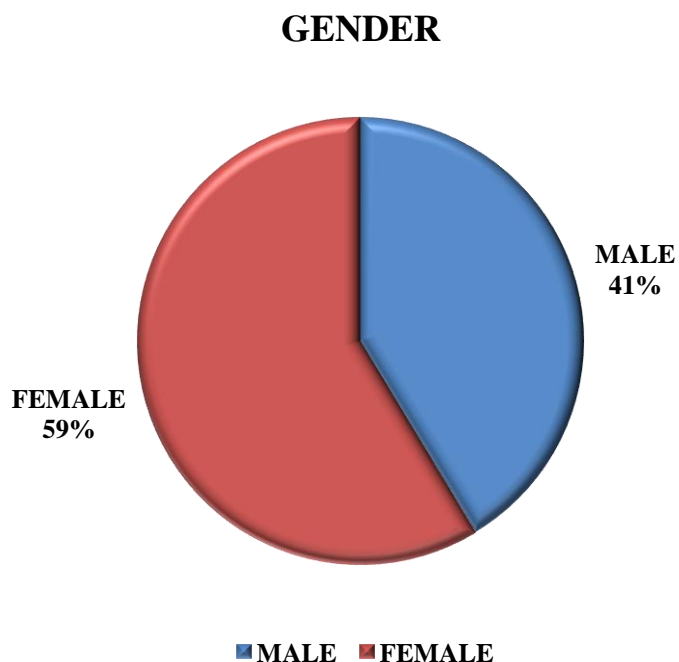
**Table-2 Gender Distribution**

Sl.No	MALE	FEMALE	TOTAL
Patients	69	81	150
Healthy volunteers	55	95	150



**Fig 2 - Gender Distribution**





**Fig 3 Gender Distribution**

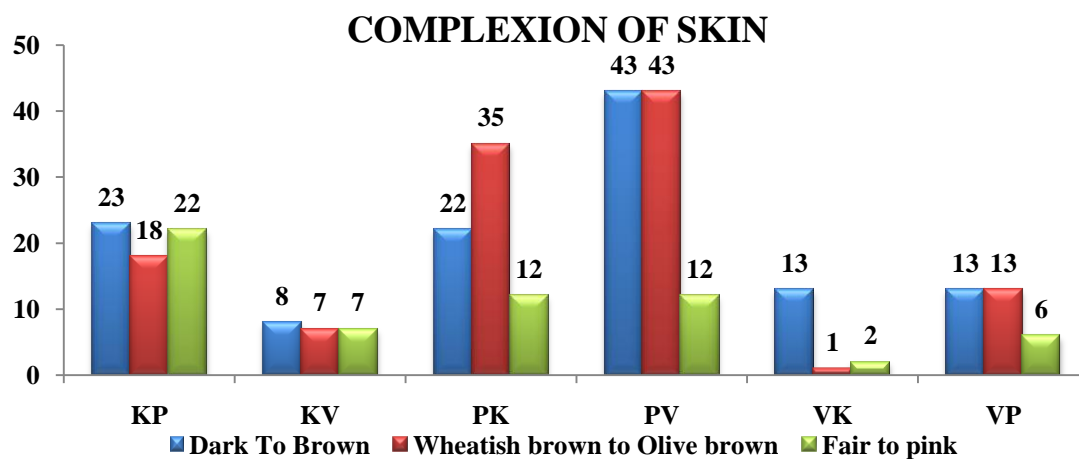
### **Observation**

Among 300 cases 124 cases were males and 176 cases were female. In male group 69 cases were diseased persons and remaining 55 subjects belonged to healthy volunteers. Infemale group 81 cases were diseased persons and remaining 95 subjects belonged to healthy volunteers.

### 7.3 COMPLEXION

**Table 3 Complexion**

Sl.No	THEGAM	Dark to Brown	Wheatish brown to olive brown	Fair to pink
1	<i>Vathapitham</i>	13	13	6
2	<i>Vathakapam</i>	13	1	2
3	<i>Pithavatham</i>	43	43	12
4	<i>Pithakapam</i>	22	35	12
5	<i>Kapavatham</i>	8	7	7
6	<i>Kapapitham</i>	23	18	22



**Fig 4 Complexion**

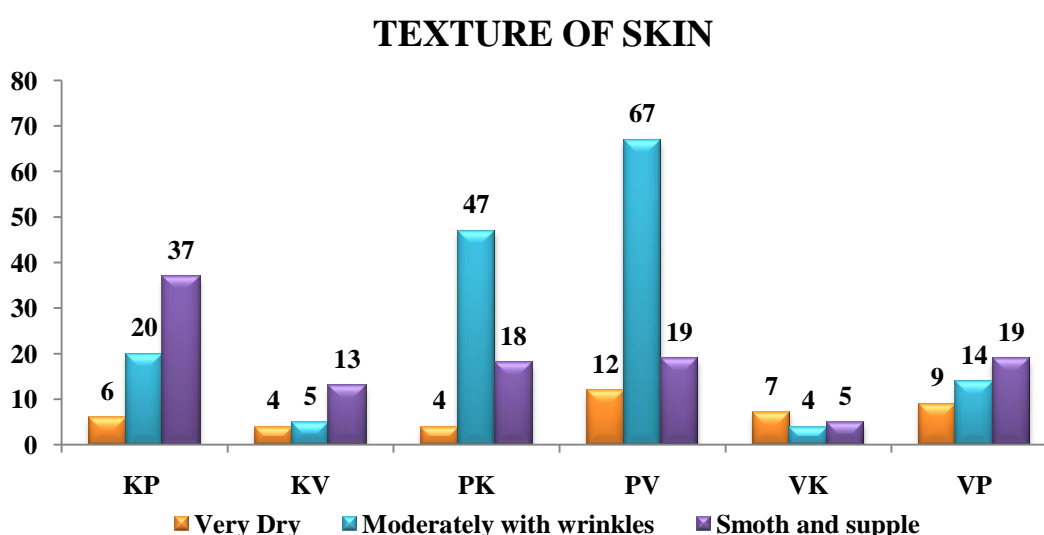
### Observation

In *Vathapithamthegi* 13 cases belonged to dark and light at mixed complexion, 13 cases belonged to fair complexion with rose tint and 6 cases belonged to complexion with yellowish and rose tint. In *Vathakapamthegi* 13 cases belonged to dark and light at mixed complexion, 1 case belonged to fair complexion with rose tint, 2 cases belonged to complexion with yellowish and rose tint. In *Pithavatham thegi*, 43 cases belong to dark and light at mixed complexion, 43 cases belonged to fair complexion with rose tint and 12 cases belonged to complexion with yellowish and rose tint. In *Pithakapamthegi* 22 cases belonged to dark and light at mixed complexion, 35 cases belonged to fair complexion with rose tint and 12 cases belonged to complexion with yellowish and rose tint. In *Kapavathamthegi* 8 cases belonged to dark and light at mixed complexion, 7 cases belonged to fair complexion with rose tint and 7 cases belonged to complexion with yellowish and rose tint. In *Kapapithamthegi* 23 cases belonged to dark and light at mixed complexion, 18 cases belonged to fair complexion with rose tint and 22 cases belonged to complexion with yellowish and rose tint.

## 7.4 TEXTURE OF SKIN

**Table 4 Texture of Skin**

Sl.No	THEGAM	Very dry	Moderately dry with wrinkles	Smooth and supple
1	<i>Vathapitham</i>	9	14	9
2	<i>Vathakapam</i>	7	4	5
3	<i>Pithavatham</i>	12	67	19
4	<i>Pithakapam</i>	4	47	18
5	<i>Kapavatham</i>	4	5	13
6	<i>Kapapitham</i>	6	20	37



**Fig 5 Texture of Skin**

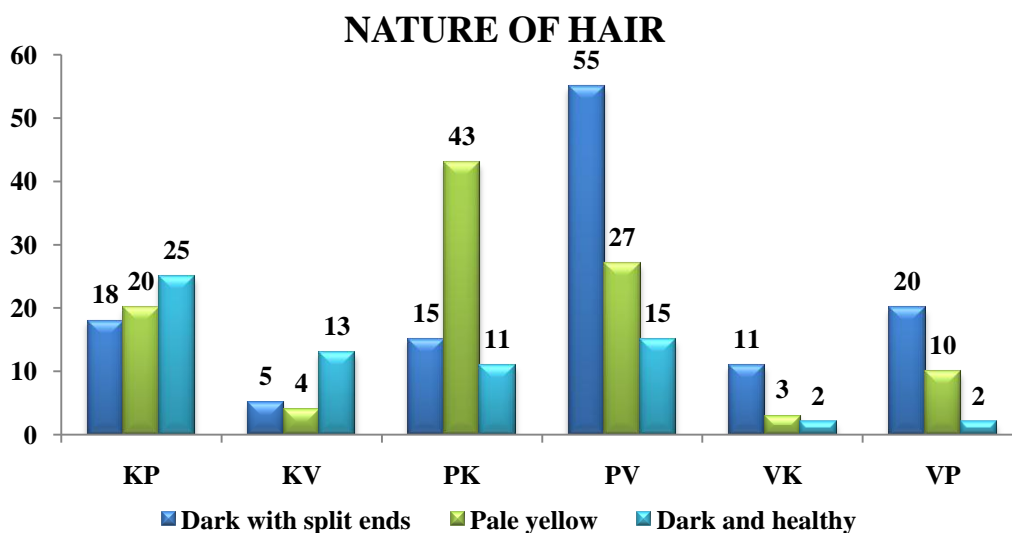
### Observation

In *Vathapithamthegi* 9 cases belonged to very dry skin, 14 cases belonged to moderately dry with wrinkled skin and 9 cases belonged to smooth and supple skin. In *Vathakapamthegi* 7 cases belonged to very dry skin, 4 cases belonged to moderately dry with wrinkled skin, 5 cases belonged to smooth and supple skin. In *Pithavatham thegi*, 12 cases belonged to very dry skin, 67 cases belonged to moderately dry with wrinkled skin and 19 cases belonged to smooth and supple skin. In *Pithakapamthegi* 4 cases belonged to very dry skin, 47 cases belonged to moderately dry with wrinkled skin and 18 cases belonged to smooth and supple skin. In *Kapavathamthegi* 4 cases belonged to very dry skin, 5 cases belonged to moderately dry with wrinkled skin and 13 cases belonged to smooth and supple skin. In *Kapapithamthegi* 6 cases belonged to very dry skin, 20 cases belonged to moderately dry with wrinkled skin and 37 cases belonged to smooth and supple skin.

## 7.5 NATURE OF HAIR

**Table 5 Nature of Hair**

Sl.No	THEGAM	Dark with split ends	Pale yellow	Dark and healthy
1	<i>Vathapitham</i>	20	10	2
2	<i>Vathakapam</i>	11	3	2
3	<i>Pithavatham</i>	55	27	15
4	<i>Pithakapam</i>	15	43	11
5	<i>Kapavatham</i>	5	4	13
6	<i>Kapapitham</i>	18	20	25



**Fig 6 Nature of Hair**

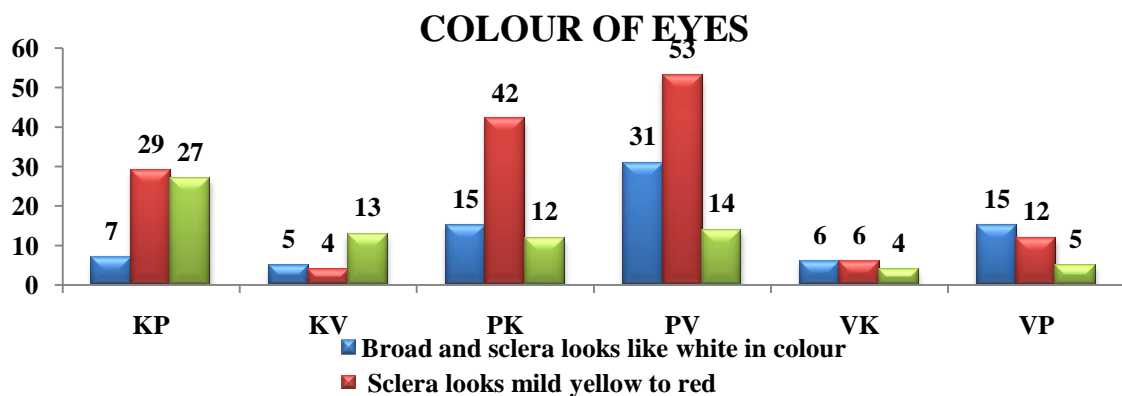
### Observation

In *Vathapithamthegi* 20 cases belonged to dark with split ended hair, 10 cases belonged to pale yellow hair and 2 cases belonged to dark and healthy hair. In *Vathakapamthegi* 11 cases belonged to dark with split ended hair, 3 cases belong to pale yellow hair, 2 cases belonged to dark and healthy hair. In *Pithavathamthegi*, 55 cases belonged to dark with split ended hair, 27 cases belonged to pale yellow hair and 15 cases belonged to dark and healthy hair. In *Pithakapamthegi* 15 cases belonged to dark and healthy hair, 43 cases belonged to pale yellow hair and 11 cases belonged to dark and healthy hair. In *Kapapithamthegi* 18 cases belonged to dark with split ended hair, 20 cases belonged to pale yellow hair and 25 cases belonged to dark and healthy hair. In *Kapavathamthegi* 5 cases belonged to dark with split ended hair, 4 cases belonged to pale yellow hair and 13 cases belonged to dark and healthy hair.

## 7.6 COLOUR OF EYES

**Table 6 Colour of Eyes**

Sl.No	THEGAM	Broad and sclera looks like white in colour	Sclera looks mild yellow to red	Sclera looks bright and white
1	<i>Vathapitham</i>	15	12	5
2	<i>Vathakapam</i>	6	6	4
3	<i>Pithavatham</i>	31	53	14
4	<i>Pithakapam</i>	15	42	12
5	<i>Kapavatham</i>	5	4	13
6	<i>Kapapitham</i>	7	29	27



**Fig 7 Color of Eyes**

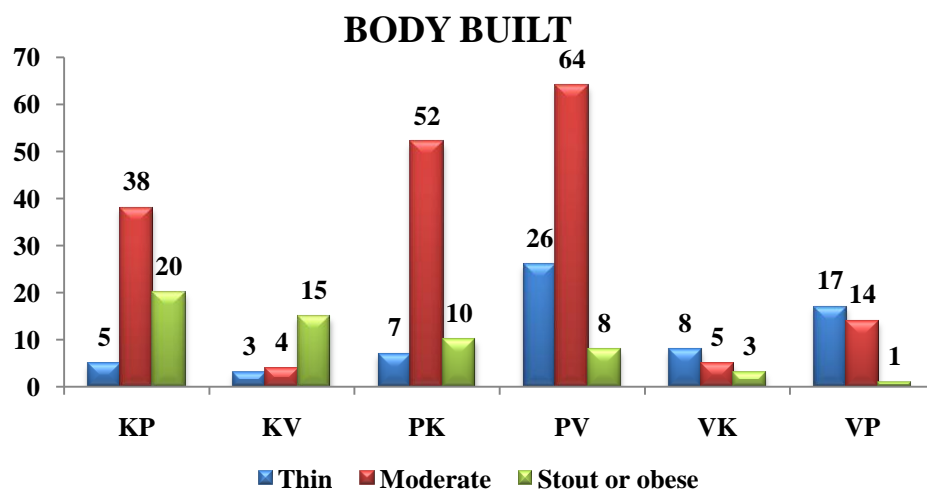
### Observation

In *Vathapithamthe*gi 15 cases had broad eyes and white sclera, 12 cases had eyes with mild yellow to red sclera and 5 cases had eyes with bright and white sclera. In *Vathakapamthe*gi 6 cases had broad eyes and white sclera, 6 cases had eyes with mild yellow to red sclera and 4 cases had eyes with bright and white sclera. In *Pithavathamthe*gi 31 cases had broad eyes and white sclera, 53 cases had eyes with mild yellow to red sclera and 14 cases had eyes with bright and white sclera. In *Pithakapamthe*gi 15 cases had broad eyes and white sclera, 42 cases had eyes with mild yellow to red sclera and 12 cases had eyes with bright and white sclera. In *Kapapithamthe*gi 7 cases had broad eyes and white sclera, 29 cases had eyes with mild yellow to red sclera and 27 cases had eyes with bright and white sclera. In *Kapavathamthe*gi 5 cases had broad eyes and white sclera, 4 cases had eyes with mild yellow to red sclera and 13 cases had eyes with bright and white sclera.

## **7.7 BODY BUILT**

**Table 7 Body Built**

Sl.No	THEGAM	Thin	Moderate	Stout or obese
1	<i>Vathapitham</i>	17	14	1
2	<i>Vathakapam</i>	8	5	3
3	<i>Pithavatham</i>	26	64	8
4	<i>Pithakapam</i>	7	52	10
5	<i>Kapavatham</i>	3	4	15
6	<i>Kapapitham</i>	5	38	20



**Fig 8 Body Built**

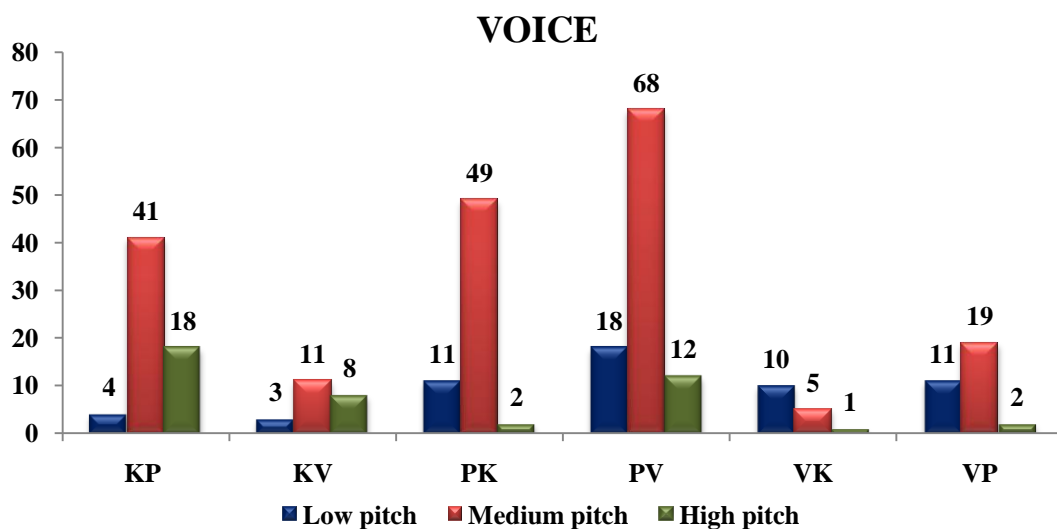
### **Observation**

In *Vathapithamthege* 17 cases had thin built, 14 cases had moderate built and 1 case had plumpness of body. In *Vathakapamthege* 8 cases had thin built, 5 cases had moderate built and 3 cases had plumpness of body. In *Pithavathamthege* 26 cases had thin built, 64 cases had moderate built and 8 cases had plumpness of body. In *Pithakapamthege* 7 cases had thin built, 52 cases had moderate built and 10 cases had plumpness of body. In *Kapavathamthege* 3 cases had thin built, 4 cases had moderate built and 15 cases had plumpness of body. In *Kapapithamthege* 5 cases had thin built, 38 cases had moderate built and 20 cases had plumpness of body.

## 7.8 VOICE

**Table 8 Voice**

Sl.No	THEGAM	Low pitch	Medium pitch	High Pitch
1	<i>Vathapitham</i>	11	19	2
2	<i>Vathakapam</i>	10	5	1
3	<i>Pithavatham</i>	18	68	12
4	<i>Pithakapam</i>	11	49	2
5	<i>Kapavatham</i>	3	11	8
6	<i>Kapapitham</i>	4	41	18



**Fig 9 Voice**

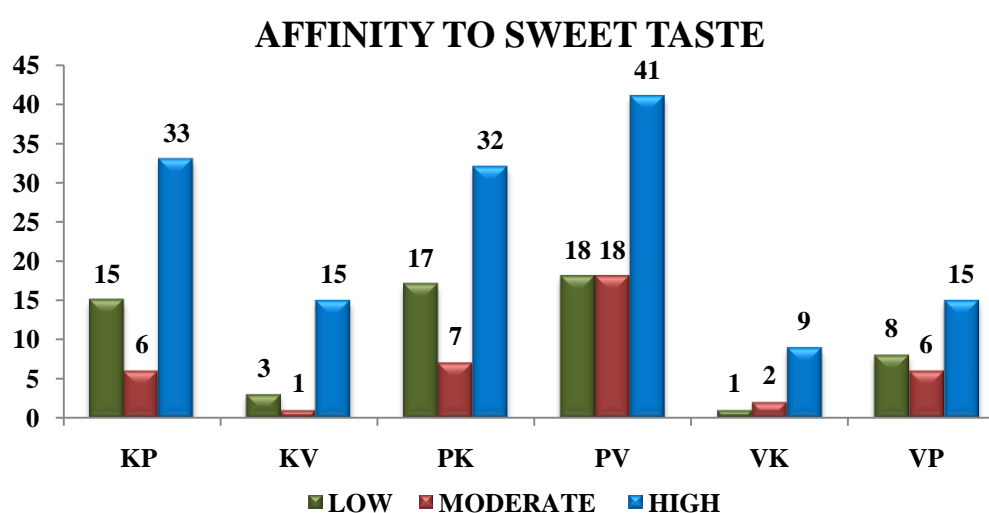
### Observation

In *Vathapithamthegi* 11 cases had low pitched voice, 19 cases had medium pitched voice and 2 cases had high pitched voice. In *Vathakapamthegi* 10 cases had low pitched voice, 5 cases had medium pitched voice and 1 case had high pitched voice. In *Pithavathamthegi* 18 cases had low pitched voice, 68 cases had medium pitched voice and 12 cases had high pitched voice. In *Pithakapamthegi* 11 cases had low pitched voice, 49 cases had medium pitched voice and 2 cases had high pitched voice. In *Kapavathamthegi* 3 cases had low pitched voice, 11 cases had medium pitched voice and 8 cases had high pitched voice. In *Kapapithamthegi* 4 cases had low pitched voice, 41 cases had medium pitched voice and 18 cases had high pitched voice.

## **7.9 AFFINITY TO SWEET TASTE**

**Table 9 Affinity to Sweet Taste**

Sl.No	THEGAM	Low	Moderate	High
1	<i>Vathapitham</i>	8	6	15
2	<i>Vathakapam</i>	1	2	9
3	<i>Pithavatham</i>	18	18	41
4	<i>Pithakapam</i>	17	7	32
5	<i>Kapavatham</i>	3	1	15
6	<i>Kapapitham</i>	15	6	33



**Fig 10 Affinity to Sweet Taste**

### **Observation**

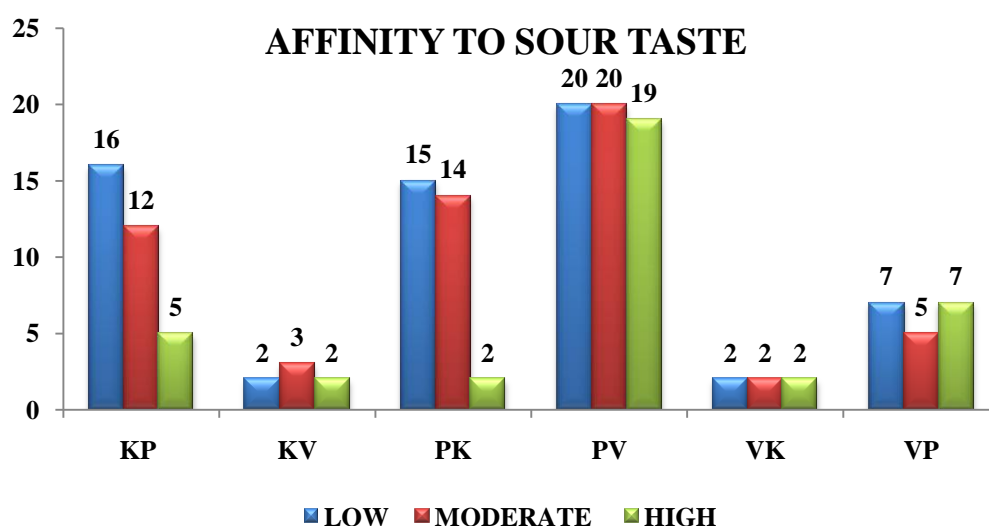
In *Vathapithamthegi* 8 cases had low affinity to sweet taste, 6 cases had moderate affinity to sweet taste and 15 cases had high affinity to sweet taste. In *Vathakabathegi* 1 case had low affinity to sweet taste, 2 cases had moderate affinity to sweet taste and 9 cases had high affinity to sweet taste. In *Pithavathathegi* 18 cases had low affinity to sweet taste, 18 cases had moderate affinity to sweet taste and 41 cases had high affinity to sweet taste. In *Pithakabathegi* 17 cases had low affinity to sweet taste, 7 cases had moderate affinity to sweet taste and 32 cases had high affinity to sweet taste. In *Kapavathathegi* 3 cases had low affinity to sweet taste, 1 case had moderate affinity to sweet taste and 15 cases had high affinity to sweet taste. In *Kapapithathegi* 15 cases had low affinity to sweet taste, 6 cases had moderate affinity to sweet taste and 33 cases had high affinity to sweet taste.



## **7.10 AFFINITY TO SOUR TASTE**

**Table 10 Affinity To Sour Taste**

Sl.No	THEGAM	Low	Moderate	High
1	<i>Vathapitham</i>	7	5	7
2	<i>Vathakapam</i>	2	2	2
3	<i>Pithavatham</i>	20	20	19
4	<i>Pithakapam</i>	15	14	2
5	<i>Kapavatham</i>	2	3	2
6	<i>Kapapitham</i>	16	12	5



**Fig 11 Affinity to Sour Taste**

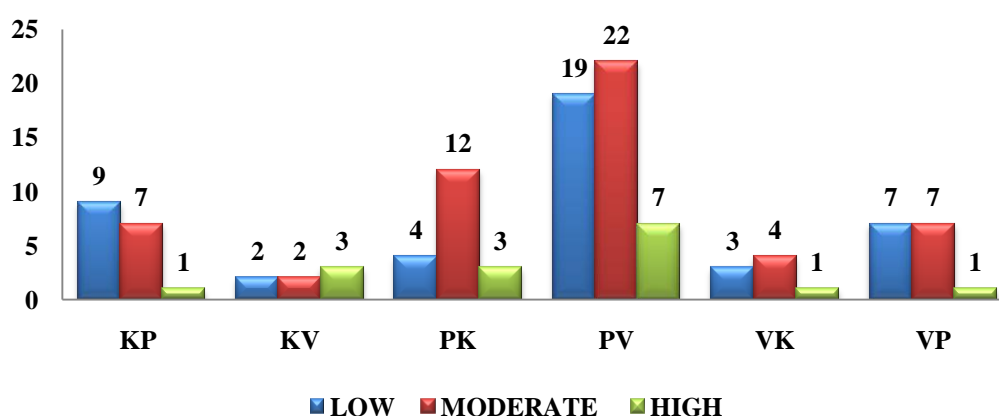
### **Observation**

In *Vathapitham* thegi 7 cases had low affinity to sour taste, 5 cases had moderate affinity to sour taste and 7 cases had high affinity to sour taste. In *Vathakapam* thegi 2 cases had low affinity to sour taste, 2 cases had moderate affinity to sour taste and 2 cases had high affinity to sour taste. In *Pithavatham* thegi 20 cases had low affinity to sour taste, 20 cases had moderate affinity to sour taste and 19 cases had high affinity to sour taste. In *Pithakapam* thegi 15 cases had low affinity to sour taste, 14 cases had moderate affinity to sour taste and 2 cases had high affinity to sour taste. In *Kapavatham* thegi 2 cases had low affinity to sour taste, 3 cases had moderate affinity to sour taste and 2 cases had high affinity to sour taste. In *Kapapitham* thegi 16 cases had low affinity to sour taste, 12 cases had moderate affinity to sour taste and 5 cases had high affinity to sour taste.

## **7.11 AFFINITY TO SALT TASTE**

**Table 11 Affinity to salt taste**

Sl.No	THEGAM	Low	Moderate	High
1	<i>Vathapitham</i>	7	7	1
2	<i>Vathakapam</i>	3	4	1
3	<i>Pithavatham</i>	19	22	7
4	<i>Pithakapam</i>	4	12	3
5	<i>Kapavatham</i>	2	2	3
6	<i>Kapapitham</i>	9	7	1



**Fig 12 Affinity to salt taste**

### **Observation**

In *Vathapithamthegi* 7 cases had low affinity to salt taste, 7 cases had moderate affinity to salt taste and 1 case had high affinity to salt taste. In *Vathakapamthegi* 3 cases had low affinity to salt taste, 4 cases had moderate affinity to salt taste and 1 case had high affinity to salt taste. In *Pithavathamthegi* 19 cases had low affinity to salt taste, 22 cases had moderate affinity to salt taste and 7 cases had high affinity to salt taste. In *Pithakapamthegi* 4 cases had low affinity to salt taste, 12 cases had moderate affinity to salt taste and 3 cases had high affinity to salt taste. In *Kapavathamthegi* 2 cases had low affinity to salt taste, 2 cases had moderate affinity to salt taste and 3 cases had high affinity to salt taste. In *Kapapithamthegi* 9 cases had low affinity to salt taste, 7 cases had moderate affinity to salt taste and 1 case had high affinity to salt taste.

## 7.12 AFFINITY TO BITTER TASTE

Table 12 Affinity to Bitter Taste

Sl.No	THEGAM	Low	Moderate	High
1	<i>Vathapitham</i>	7	6	3
2	<i>Vathakapam</i>	3	2	2
3	<i>Pithavatham</i>	27	14	9
4	<i>Pithakapam</i>	18	8	11
5	<i>Kapavatham</i>	8	3	0
6	<i>Kapapitham</i>	18	4	4

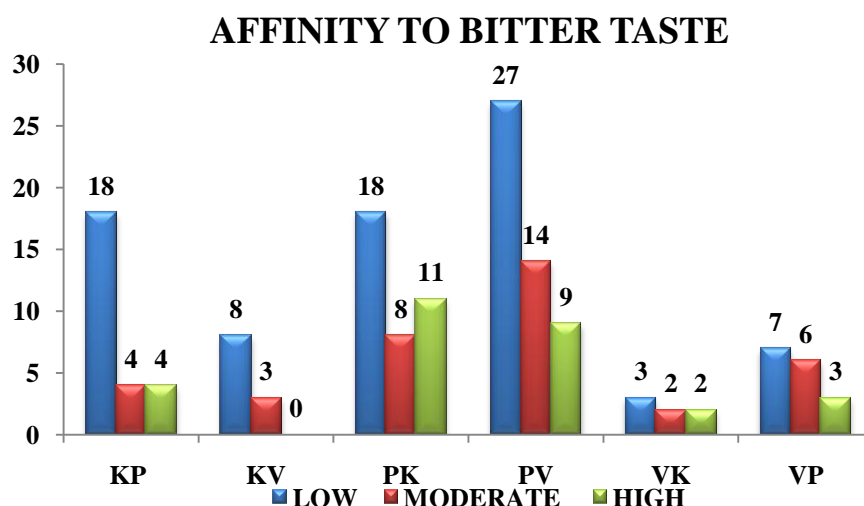


Fig 13 Affinity to Bitter Taste

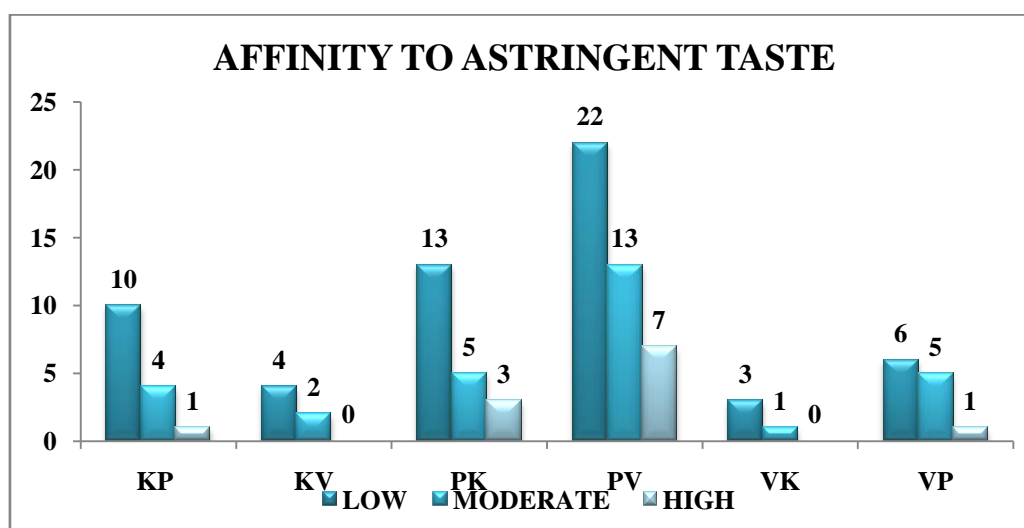
### Observation

In *Vathapithamthegi* 7 cases had low affinity to bitter taste, 6 cases had moderate affinity to bitter taste and 3 cases had high affinity to bitter taste. In *Vathakapamthegi* 3 cases had low affinity to bitter taste, 2 cases had moderate affinity to bitter taste and 2 cases had high affinity to bitter taste. In *Pithavathamthegi* 27 cases had low affinity to bitter taste, 14 cases had moderate affinity to bitter taste and 9 cases had high affinity to bitter taste. In *Pithakapamthegi* 18 cases had low affinity to bitter taste, 8 cases had moderate affinity to bitter taste and 11 cases had high affinity to bitter taste. In *Kapavathamthegi* 8 cases had low affinity to bitter taste, 3 cases had moderate affinity to bitter taste and no case had high affinity to bitter taste. In *Kapapithamthegi* 18 cases had low affinity to bitter taste, 4 cases had moderate affinity to bitter taste and 4 cases had high affinity to bitter taste.

### **7.13 AFFINITY TO ASTRINGENT TASTE**

**Table 13 Affinity to Astringent Taste**

Sl.No	THEGAM	Low	Moderate	High
1	<i>Vathapitham</i>	6	5	1
2	<i>Vathakapam</i>	3	1	0
3	<i>Pithavatham</i>	22	13	7
4	<i>Pithakapam</i>	13	5	3
5	<i>Kapavatham</i>	4	2	0
6	<i>Kapapitham</i>	10	4	1



**Fig 14 Affinity to Astringent Taste**

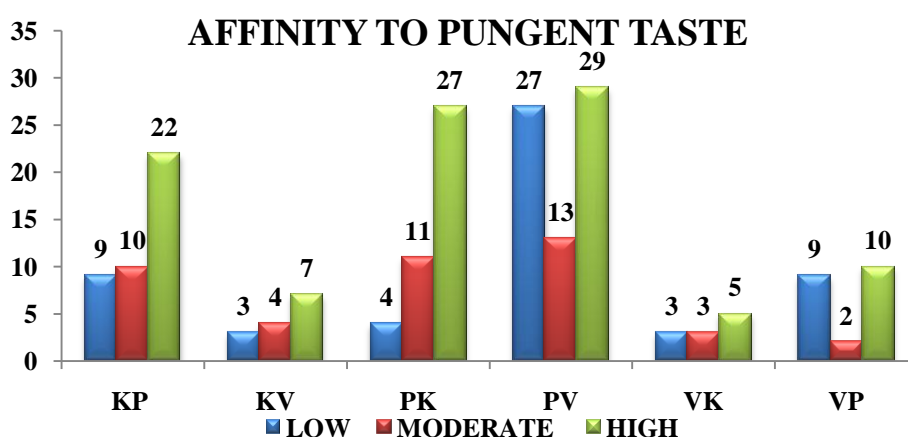
#### **Observation**

In *Vathapitham* thegi 6 cases had low affinity to astringent taste, 5 cases had moderate affinity to astringent taste and 1 case had high affinity to astringent taste. In *Vathakapam* thegi 3 cases had low affinity to astringent taste, 1 case had moderate affinity to astringent taste and no case had high affinity to astringent taste. In *Pithavatham* thegi 22 cases had low affinity to astringent taste, 13 cases had moderate affinity to astringent taste and 7 cases had high affinity to astringent taste. In *Pithakapam* thegi 13 cases had low affinity to astringent taste, 5 cases had moderate affinity to astringent taste and 3 cases had high affinity to astringent taste. In *Kapavatham* thegi 4 cases had low affinity to astringent taste, 2 cases had moderate affinity to astringent taste and no case had high affinity to astringent taste. In *Kapapitham* thegi 10 cases had low affinity to astringent taste, 4 cases had moderate affinity to astringent taste and 1 case had high affinity to astringent taste.

## **7.14 AFFINITY TO PUNGENT TASTE**

**Table 14 Affinity to Pungent Taste**

Sl.No	THEGAM	Low	Moderate	High
1	Vathapitham	9	2	10
2	Vathakapam	3	3	5
3	Pithavatham	27	13	29
4	Pithakapam	4	11	27
5	Kapavatham	3	4	7
6	Kapapitham	9	10	22



**Fig 15 Affinity to Pungent Taste**

### **Observation**

In *Vathapithamthegi* 9 cases had low affinity to pungent taste, 2 cases had moderate affinity to pungent taste and 10 cases had high affinity to pungent taste. In *Vathakapamthegi* 3 cases had low affinity to pungent taste, 3 cases had moderate affinity to pungent taste and 5 cases had high affinity to pungent taste. In *Pithavathamthegi* 27 cases had low affinity to pungent taste, 13 cases had moderate affinity to pungent taste and 29 cases had high affinity to pungent taste. In *Pithakapamthegi* 4 cases had low affinity to pungent taste, 11 cases had moderate affinity to pungent taste and 27 cases had high affinity to pungent taste. In *Kapavathamthegi* 3 cases had low affinity to pungent taste, 4 cases had moderate affinity to pungent taste and 7 cases had high affinity to pungent taste. In *Kapapithamthegi* 9 cases had low affinity to pungent taste, 10 cases had moderate affinity to pungent taste and 22 cases had high affinity to pungent taste.

## 7.15 ABILITY IN DECISION MAKING

Table 15 Ability in Decision Making

Sl.No	THEGAM	Low	Moderate	High
1	<i>Vathapitham</i>	19	7	6
2	<i>Vathakapam</i>	7	3	6
3	<i>Pithavatham</i>	24	60	14
4	<i>Pithakapam</i>	10	24	35
5	<i>Kapavatham</i>	5	2	15
6	<i>Kapapitham</i>	7	11	45

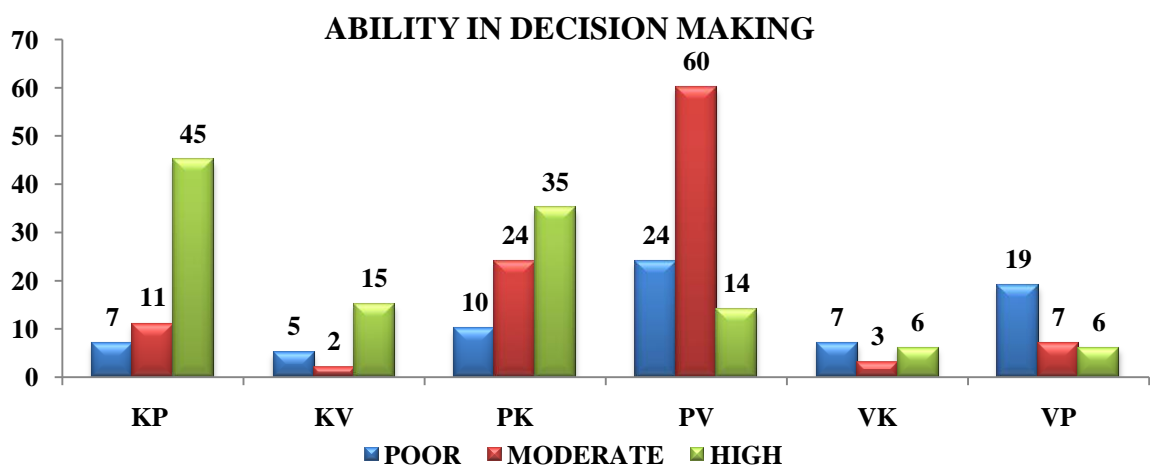


Fig 16 Ability in Decision Making

### Observation

In *Vathapithamthegi* 19 cases had poor ability in decision making, 7 cases had moderate ability in decision making and 6 cases had high ability in decision making. In *Vathakapathegi* 7 cases had poor ability in decision making, 3 cases had moderate ability in decision making and 6 cases had high ability in decision making. In *Pithavathamthegi* 24 cases had poor ability in decision making, 60 cases had moderate ability in decision making and 14 cases had high ability in decision making. In *Pithakapamthegi* 10 cases had poor ability in decision making, 24 cases had moderate ability in decision making and 35 cases had high ability in decision making. In *Kapavathamthegi* 5 cases had poor ability in decision making, 2 cases had moderate ability in decision making and 15 cases had high ability in decision making. In *Kapapithamthegi*, 7 cases had poor ability in decision making, 11 cases had moderate ability in decision making and 45 cases had high ability in decision making.

## 7.16 FLAIR FOR BEFRIENDING

Table 16 FLAIR FOR BEFRIENDING

Sl.No	THEGAM	Poor	Moderate	Good
1	<i>Vathapitham</i>	14	8	10
2	<i>Vathakapam</i>	5	6	5
3	<i>Pithavatham</i>	24	53	21
4	<i>Pithakapam</i>	18	34	17
5	<i>Kapavatham</i>	9	3	10
6	<i>Kapapitham</i>	19	10	34

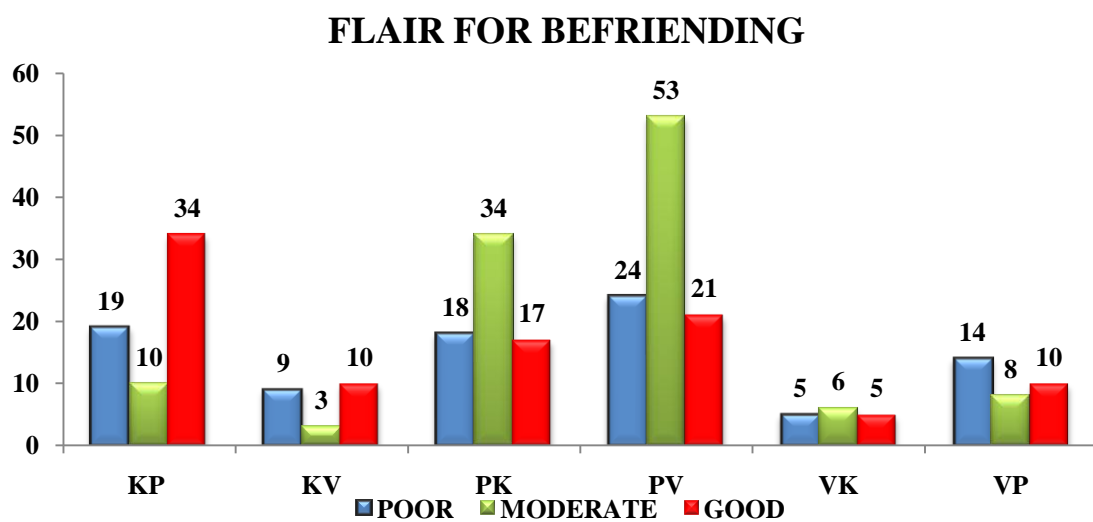


Fig 17 FLAIR FOR BEFRIENDING

### Observation

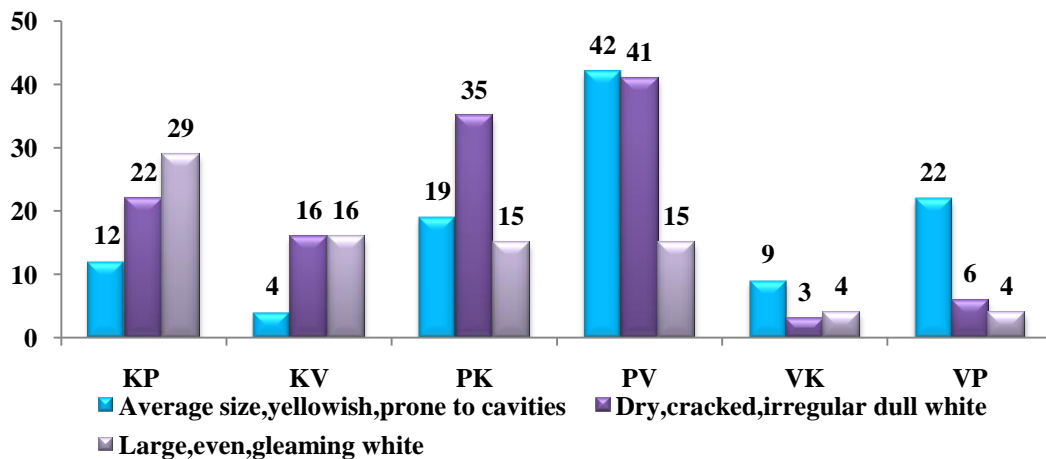
In *Vathapithathegi* 14 cases had poor ability in friend making, 8 cases had moderate ability in friend making and 10 cases had high ability in friend making. In *Vathakapathegi* 5 cases had poor ability in friend making, 6 cases had moderate ability in friend making and 5 cases had high ability in friend making. In *Pithavathathegi* 24 cases had poor ability in friend making, 53 cases had moderate ability in friend making and 21 cases had high ability in friend making. In *Pithakapathegi* 18 cases had poor ability in friend making, 34 cases had moderate ability in friend making and 17 cases had high ability in friend making. In *Kapavathathegi* 9 cases had poor ability in friend making, 3 cases had moderate ability in friend making and 10 cases had high ability in friend making. In *Kapapithathegi* 19 cases had poor ability in friend making, 10 cases had moderate ability in friend making and 34 cases had high ability in friend making.

## 7.17 TEETH

**Table 17 Teeth**

Sl.No	THEGAM	Poor	Moderate	Good
1	<i>Vathapitham</i>	22	6	4
2	<i>Vathakapam</i>	9	3	4
3	<i>Pithavatham</i>	42	41	15
4	<i>Pithakapam</i>	19	35	15
5	<i>Kapavatham</i>	4	16	16
6	<i>Kapapitham</i>	12	22	29

### TEETH



**Fig 18 Teeth**

### Observation

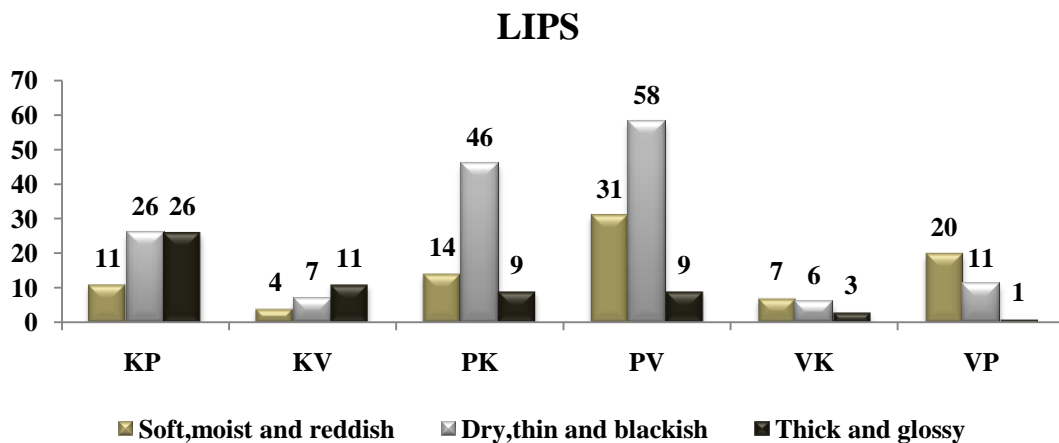
In *Vathapitham* 22 cases had teeth with average size and yellowish with cavities, 6 cases had dry cracked with irregular dull white teeth and 4 cases had large, even and gleaming white teeth. In *Vathakapam* 9 cases had teeth with average size and yellowish with cavities, 3 cases had dry cracked with irregular dull white teeth and 4 cases had large even and gleaming white teeth. In *Pithavatham* 42 cases had teeth with average size and yellowish with cavities, 41 cases had dry cracked with irregular dull white teeth and 15 cases had large even and gleaming white teeth. In *Pithakapam* 19 cases had teeth with average size and yellowish with cavities, 35 cases had dry cracked with irregular dull white teeth and 15 cases had large even and gleaming white teeth. In *Kapavatham* 4 cases had teeth with average size and yellowish with cavities, 16 cases had dry cracked with irregular dull white teeth and 16 cases had large even and gleaming white teeth. In *Kapapitham* 12 cases had teeth with average size and yellowish with cavities, 22 cases had dry cracked with irregular dull white teeth and 29 cases had large even and gleaming white teeth.



## 7.18 LIPS

**Table 18 Lips**

Sl.No	THEGAM	Soft moist and reddish	Dry, thin and blackish	Thick and glossy
1	<i>Vathapitham</i>	8	6	15
2	<i>Vathakapam</i>	1	2	9
3	<i>Pithavatham</i>	18	18	41
4	<i>Pithakapam</i>	17	7	32
5	<i>Kapavatham</i>	3	1	15
6	<i>Kapapitham</i>	15	6	33



**Fig 19 Lips**

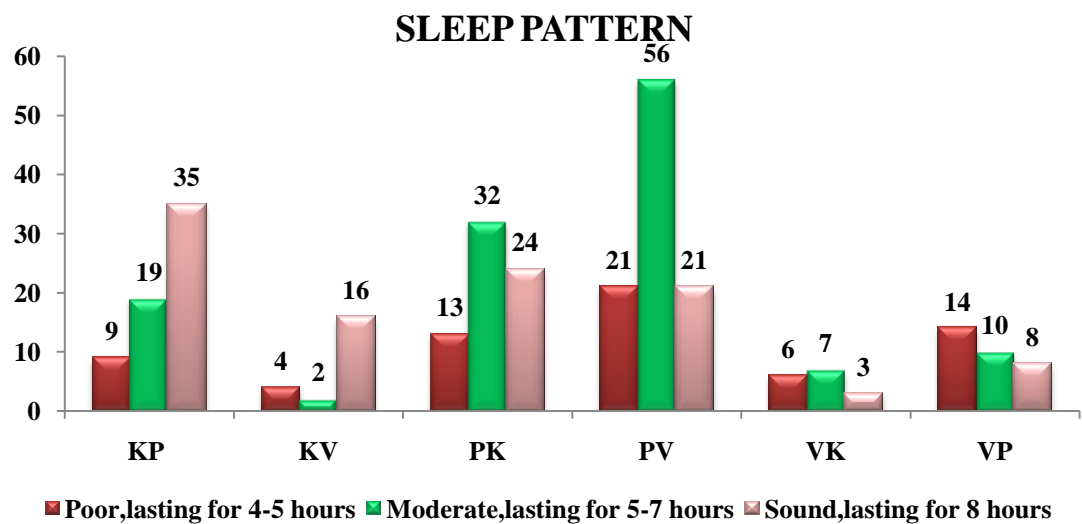
## Observation

In *Vathapitham* 20 cases had soft moist and reddish lips, 11 cases had dry thin and blackish lips and 1 case had thick and glossy lips. In *Vathakapam* 7 cases had soft moist and reddish lips, 6 cases had dry thin and blackish lips and 3 cases had thick and glossy lips. In *Pithavatham* 31 cases had soft moist and reddish lips, 58 cases had dry thin and blackish lips and 9 cases had thick and glossy lips. In *Pithakapam* 14 cases had soft moist and reddish lips, 46 cases had dry thin and blackish lips and 9 cases had thick and glossy lips. In *Kapavatham* 4 cases had soft moist and reddish lips, 7 cases had dry thin and blackish lips and 11 cases had thick and glossy lips. In *Kapapitham* 11 cases had soft moist and reddish lips, 26 cases had dry thin and blackish lips and 26 cases had thick and glossy lips.

## 7.19 SLEEP PATTERN

**Table 19 Sleep Pattern**

Sl.No	THEGAM	Poor, lasting for 4-5 hours	Moderate, lasting for 5-7 hours	Sound, lasting for 8 hours
1	<i>Vathapitham</i>	14	10	8
2	<i>Vathakapam</i>	6	7	3
3	<i>Pithavatham</i>	21	56	21
4	<i>Pithakapam</i>	13	32	24
5	<i>Kapavatham</i>	4	2	16
6	<i>Kapapitham</i>	9	19	35



**Fig 20 Sleep Pattern**

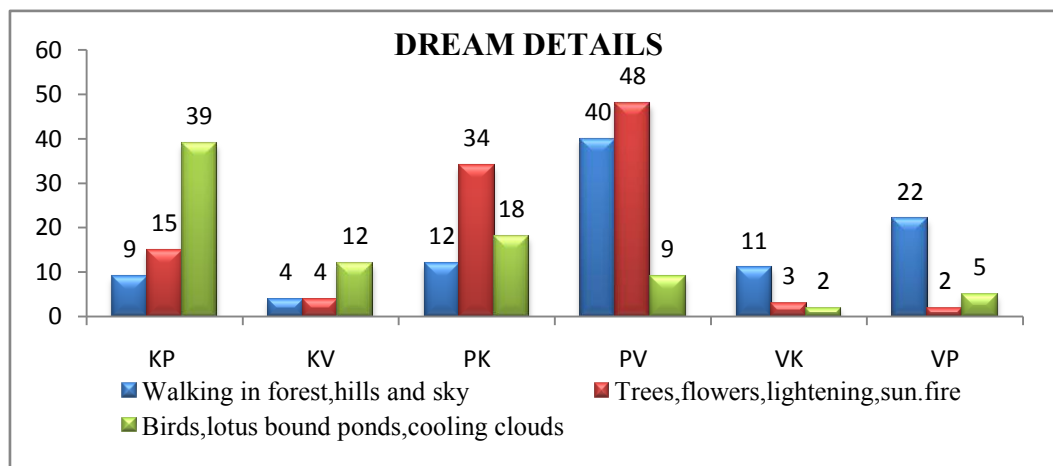
### Observation

In *Vathapithathegi* 14 of them had poor sleep lasting 4-5 hours, 10 of them had moderate sleep lasting 5-7 hours, 8 of them had sound sleep lasting for 8 hours. In *Vathakapathegi* 6 of them had poor sleep lasting 4-5 hours, 7 of them had moderate sleep lasting 5-7 hours, 3 cases of them had sound sleep lasting for 8 hours. In *Pithavathathegi* 21 of them had poor sleep lasting 4-5 hours, 56 of them cases had moderate sleep lasting 5-7 hours, 21 of them had sound sleep lasting for 8 hours. In *Pithakapathegi* 13 of them had poor sleep lasting 4-5 hours, 32 of them had moderate sleep lasting 5-7 hours, 24 cases had sound sleep lasting for 8 hours. In *Kapavathathegi* 4 cases poor sleep lasting 4-5 hours, 2 cases had moderate sleep lasting 5-7 hours, 16 cases had sound sleep lasting for 8 hours. In *Kapapithathegi* 9 cases poor sleep lasting 4-5 hours, 19 of them had moderate sleep lasting 5-7 hours, 35 of them had sound sleep lasting for 8 hours.

## 7.20 DREAM DETAILS

**Table 20 Dream Details**

Sl.No	THEGAM	Walking in forest, hills and sky	Trees, flowers, lightening, sun, fire	Birds, lotus bound ponds, cooling clouds
1	<i>Vathapitham</i>	22	2	5
2	<i>Vathakapam</i>	11	3	2
3	<i>Pithavatham</i>	40	48	9
4	<i>Pithakapam</i>	12	34	18
5	<i>Kapavatham</i>	4	4	12
6	<i>Kapapitham</i>	9	15	39



**Fig 21 Dream Details**

## Observation

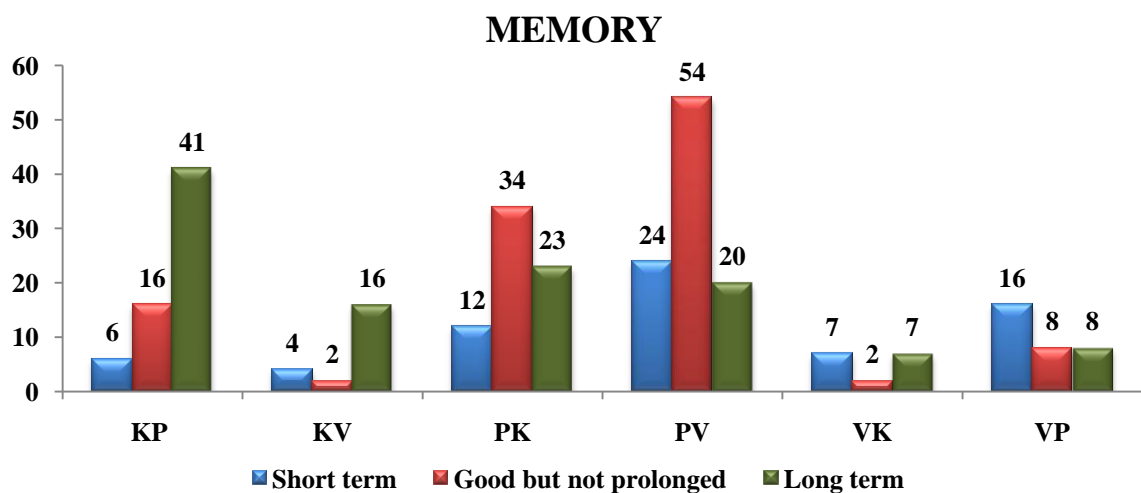
In *Vathapithathegi* 22 cases had dreams like walking in forest, hills and sky, 2 cases had dreams like watching trees, flowers, lightening, sun and fire, 5 cases had dreams like watching birds, lotus bound ponds, cooling clouds. In *Vathaakapathegi* 11 cases had dreams like walking in forest, hills and sky, 3 cases had dreams like watching trees, flowers, lightening, sun and fire, 2 cases had dreams like watching birds, lotus bound ponds, cooling clouds. In *Pithavathathegi* 40 cases had dreams like walking in forest, hills and sky, 48 cases had dreams like watching trees, flowers, lightening, sun and fire, 9 cases had dreams like watching birds, lotus bound ponds, cooling clouds. In *Pithakapathegi* 12 cases had dreams like walking in forest, hills and sky, 34 cases had dreams like watching trees, flowers, lightening, sun and fire, 18 cases had dreams like watching birds, lotus bound ponds, cooling clouds. In *Kapavathathegi* 4 cases had dreams

like walking in forest, hills and sky, 4 cases had dreams like watching trees, flowers, lightening, sun and fire, 12 cases had dreams like watching birds, lotus bound ponds, cooling clouds. In *Kapapithathegi* 9 cases had dreams like walking in forest, hills and sky, 15 cases had dreams like watching trees, flowers, lightening, sun and fire, 39 cases had dreams like watching birds, lotus bound ponds, cooling clouds.

## 7.21MEMORY

**Table.21 Memory**

Sl.No	THEGAM	Short term	Good but not prolonged	Long term
1	<i>Vathapitham</i>	16	8	8
2	<i>Vathakapam</i>	7	2	7
3	<i>Pithavatham</i>	24	54	20
4	<i>Pithakapam</i>	12	34	23
5	<i>Kapavatham</i>	4	2	16
6	<i>Kapapitham</i>	6	16	41



**Fig .22 Memory**

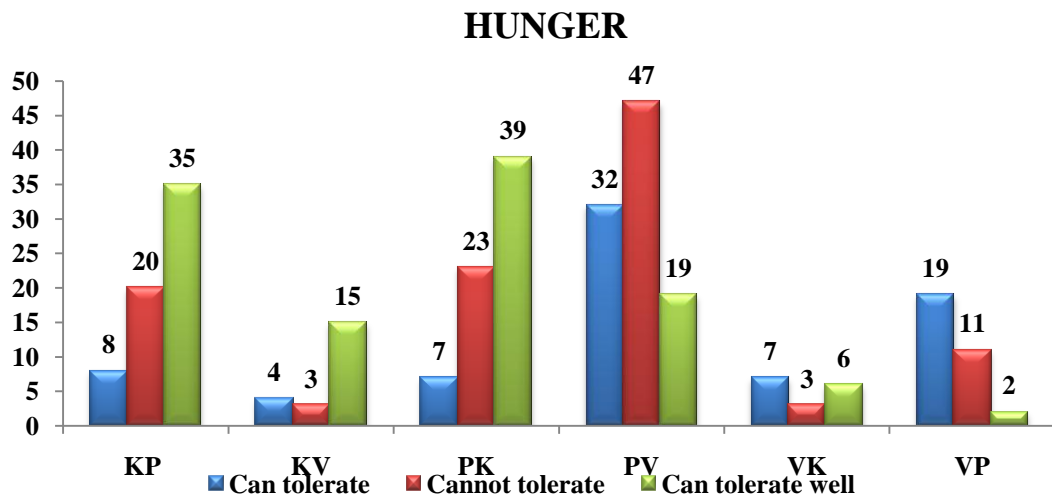
### Observation

In *Vathapithathegi* 16 cases had short term memory, 8 cases had good but not prolonged memory, 8 cases had long term memory. In *Vathakapathegi* 7 cases had short term memory, 2 cases had good but not prolonged memory, 7 cases had long term memory. In *Pithavathathegi* 24 cases had short term memory, 54 cases had good but not prolonged memory, 20 cases had long term memory. In *Pithakapathegi* 12 cases had short term memory, 34 cases had good but not prolonged memory, 23 cases had long term memory. In *Kapavathathegi* 4 cases had short term memory, 2 cases had good but not prolonged memory, and 16 cases had long term memory. In *Kapapithathegi* 6 cases had short term memory, 16 cases had good but not prolonged memory, 41 cases had long term memory.

## 7.22 HUNGER

**Table 22 Hunger**

Sl.No	THEGAM	Can tolerate	Cannot tolerate	Can tolerate well
1	<i>Vathapitham</i>	19	11	2
2	<i>Vathakapam</i>	7	3	6
3	<i>Pithavatham</i>	32	47	19
4	<i>Pithakapam</i>	7	23	39
5	<i>Kapavatham</i>	4	3	15
6	<i>Kapapitham</i>	8	20	35



**Fig 23 Hunger**

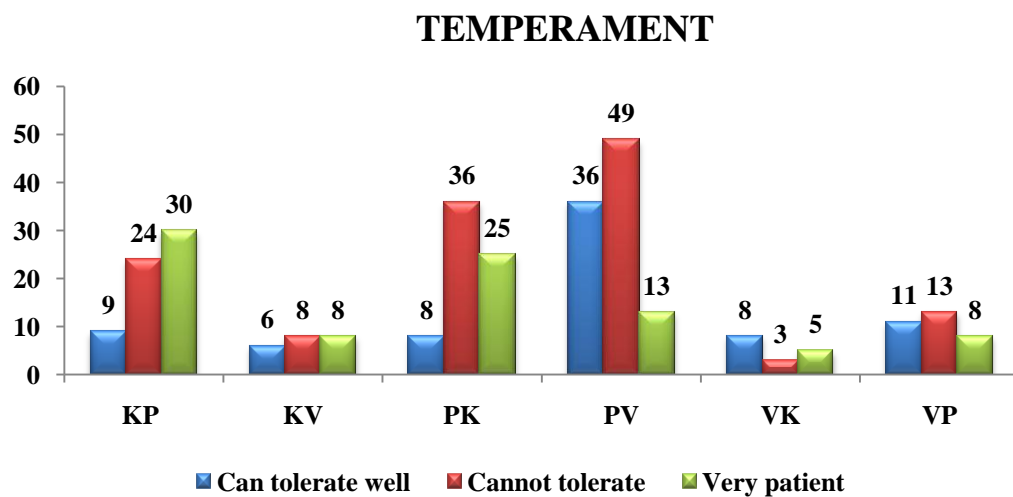
### Observation

In *Vathapithathegi* 19 cases could tolerate hunger. 11 cases could not tolerate hunger and 2 cases could tolerate hunger well. In *Vathakapathegi* 7 cases could tolerate hunger. 3 cases could not tolerate hunger and 6 cases could tolerate hunger well. In *Pithavathathegi* 32 cases could tolerate hunger. 47 cases could not tolerate hunger and 19 cases could tolerate hunger well. In *Pithakapathegi* 7 cases could tolerate hunger. 23 cases could not tolerate hunger and 39 cases could tolerate hunger well. In *Kapavathathegi* 4 cases could tolerate hunger. 3 cases could not tolerate hunger and 15 cases could tolerate hunger well. In *Kapapithathegi* 8 cases could tolerate hunger. 20 cases could not tolerate hunger and 35 cases could tolerate hunger well.

## 7.23 TEMPERAMENT

**Table 23 Temperament**

Sl.No	THEGAM	Can tolerate well	Cannot tolerate	Very patient
1	<i>Vathapitham</i>	11	13	8
2	<i>Vathakapam</i>	8	3	5
3	<i>Pithavatham</i>	36	49	13
4	<i>Pithakapam</i>	8	36	25
5	<i>Kapavatham</i>	6	8	8
6	<i>Kapapitham</i>	9	24	30



**Fig 24 Temperament**

### Observation

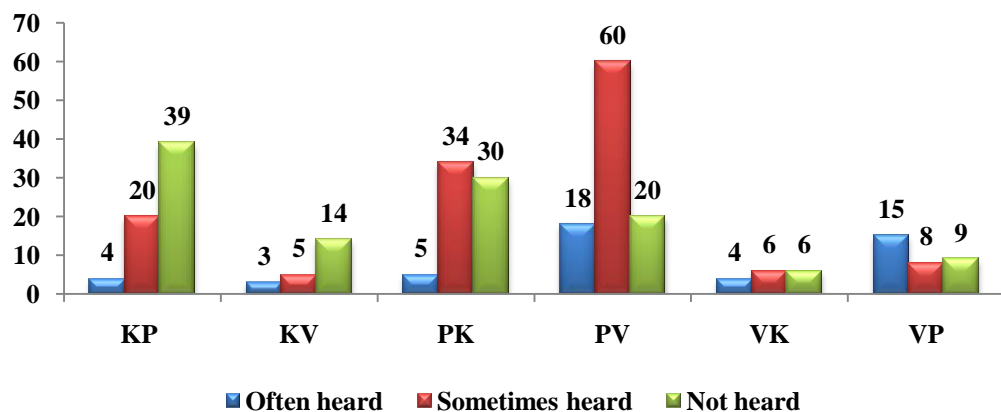
In *Vathapitham* 11 cases can tolerate temper. 13 cases cannot tolerate temper and 8 cases were very patient. In *Vathakapam* 8 cases can tolerate temper. 3 cases cannot tolerate temper and 5 cases were very patient. In *Pithavatham* 36 cases can tolerate temper. 49 cases cannot tolerate temper and 13 cases were very patient. In *Pithakapam* 8 cases can tolerate temper. 36 cases cannot tolerate temper and 25 cases were very patient. In *Kapavatham* 6 cases can tolerate temper. 8 cases cannot tolerate temper and 8 cases were very patient. In *Kapapitham* 9 cases can tolerate temper, 24 cases cannot tolerate temper and 30 cases were very patient.

## 7.24 CRACKLING SOUND OF JOINTS

**Table 24 Crackling Sound of Joints**

Sl.No	THEGAM	Often heard	Sometimes heard	Not heard
1	<i>Vathapitham</i>	15	8	9
2	<i>Vathakapam</i>	4	6	6
3	<i>Pithavatham</i>	18	60	20
4	<i>Pithakapam</i>	5	34	30
5	<i>Kapavatham</i>	3	5	14
6	<i>Kapapitham</i>	4	20	39

### CRACKLING SOUND OF JOINTS



**Fig 25 Crackling Sound of Joints**

### Observation

In *Vathapithathegi* 15 cases often had crackling sound of joints, 8 cases sometimes had crackling sound of joints, 9 cases did not have crackling sound of joints. In *Vathakapathegi* 4 cases often had crackling sound of joints, 6 cases sometimes had crackling sound of joints, 6 cases not heard crackling sound of joints. In *Pithavathathegi* 18 cases often had crackling sound of joints, 60 cases sometimes had crackling sound of joints, 20 cases did not have crackling sound of joints. In *Pithakapathegi* 5 cases often had crackling sound of joints, 34 cases sometimes had crackling sound of joints, 30 cases did not have crackling sound of joints. In *Kapavathathegi* 3 cases often had crackling sound of joints, 5 cases sometimes had crackling sound of joints, 14 cases did not have crackling sound of joints. In *Kapapithathegi* 4 cases often had crackling sound of joints, 20 cases sometimes had crackling sound of joints, 39 cases did not have crackling sound of joints.

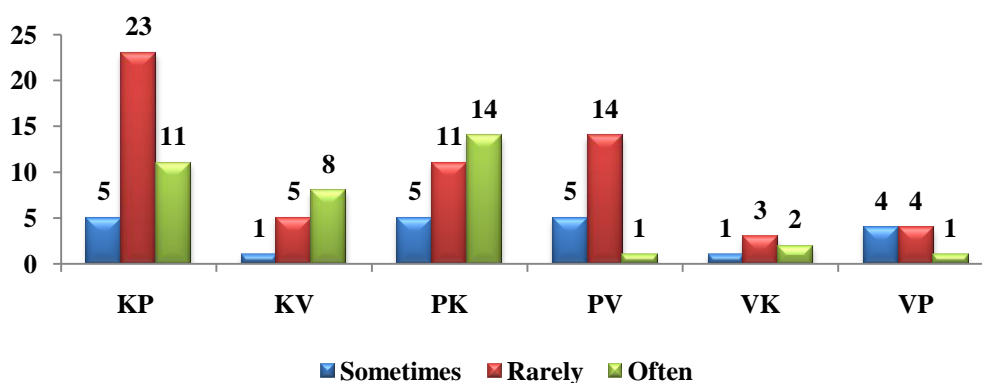


## 7.25 RECCURENCE OF COLD AND EXPECTORATION

**Table 25 Recurrence of Cold and Expectorat**

Sl.No	THEGAM	Sometimes	Rarely	Often
1	Vathapitham	4	4	1
2	Vathakapam	1	3	2
3	Pithavatham	5	14	1
4	Pithakapam	5	11	14
5	Kapavatham	1	5	8
6	Kapapitham	5	23	11

### RECCURENCE OF COLD AND EXPECTORATION



**Fig 26 Recurrence of Cold and Expectorat**

### Observation

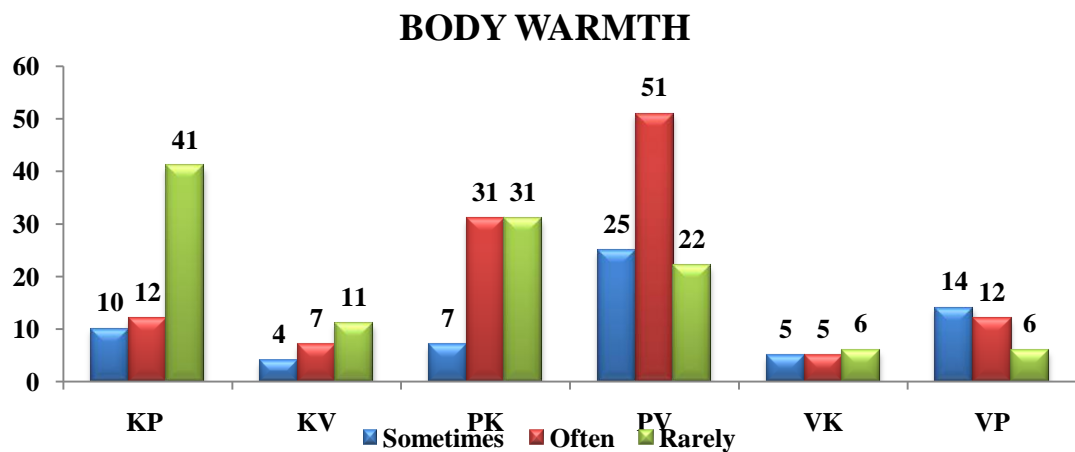
In *Vathapithat* 4 cases sometimes had the recurrence of cold and expectoration, 4 cases rarely had the recurrence of cold and expectoration and 1 case often had recurrence of cold and expectoration. In *Vathakapat* 1 case sometimes had the recurrence of cold and expectoration, 3 cases rarely had the recurrence of cold and expectoration and 2 cases often had recurrence of cold and expectoration. In *Pithavathat* 5 cases sometimes had the recurrence of cold and expectoration, 14 cases rarely had the recurrence of cold and expectoration and 1 case often had recurrence of cold and expectoration. In *Pithakapat* 5 cases sometimes had the recurrence of cold and expectoration, 11 cases rarely had the recurrence of cold and expectoration and 14 cases often had recurrence of cold and expectoration. In *Kapavathat* 1 case sometimes had the recurrence of cold and expectoration, 5 cases rarely had the recurrence

of cold and expectoration and 8 cases often had recurrence of cold and expectoration. In *Kapapithathegi* ,5cases sometimes had the recurrence of cold and expectoration, 23 cases rarely had the recurrence of cold and expectoration and 11 cases often had recurrence of cold and expectoration.

## 7.26 BODY WARMTH

**Table 26 Body Warmth**

Sl.No	THEGAM	Sometimes	Often	Rarely
1	<i>Vathapitham</i>	14	12	6
2	<i>Vathakapam</i>	5	5	6
3	<i>Pithavatham</i>	25	51	22
4	<i>Pithakapam</i>	7	31	31
5	<i>Kapavatham</i>	4	7	11
6	<i>Kapapitham</i>	10	12	41



**Fig 27 Body Warmth**

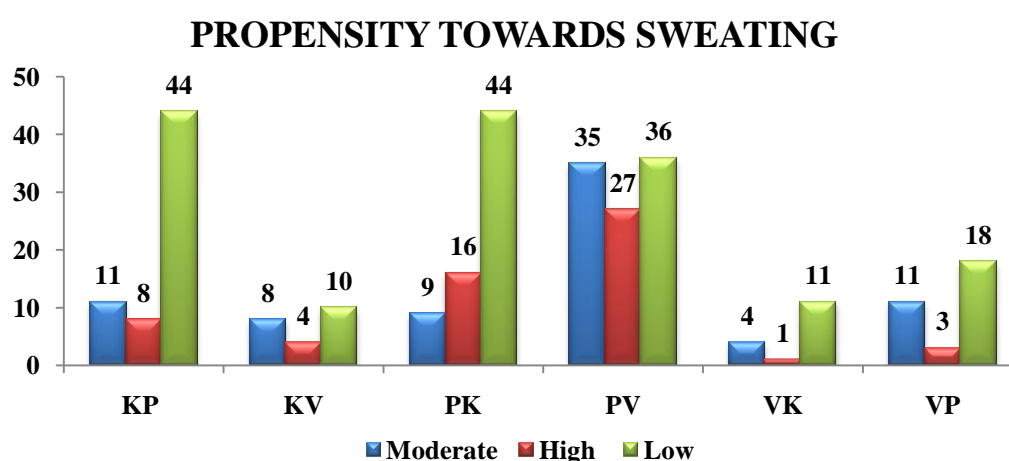
### Observation

In *Vathapithathegi* 14 cases sometimes had the feel of body warmth, 12 cases often had the feel of body warmth and 6 cases rarely had the feel of body warmth. In *Vathakapathegi* 5 cases sometimes had the feel of body warmth, 5 cases often had the feel of body warmth and 6 cases rarely had the feel of body warmth. In *Pithavathathegi* 25 cases sometimes had the feel of body warmth, 51 cases often had the feel of body warmth and 22 cases rarely had the feel of body warmth. In *Pithakapathegi* 7 cases sometimes had the feel of body warmth, 31 cases often had the feel of body warmth and 31 cases rarely had the feel of body warmth. In *Kapavathathegi* 4 cases sometimes had the feel of body warmth, 7 cases often had the feel of body warmth and 11 cases rarely had the feel of body warmth. In *Kapapithathegi*, 10 cases sometimes had the feel of body warmth, 12 cases often had the feel of body warmth and 41 cases rarely had the feel of body warmth.

## 7.27 PROPENSITY TOWARDS SWEATING

**Table 27 Propensity Towards Sweating**

Sl.No	THEGAM	Moderate	High	Low
1	<i>Vathapitham</i>	11	3	18
2	<i>Vathakapam</i>	4	1	11
3	<i>Pithavatham</i>	35	27	36
4	<i>Pithakapam</i>	9	16	44
5	<i>Kapavatham</i>	8	4	10
6	<i>Kapapitham</i>	11	8	44



**Fig 28 Propensity towards Sweating**

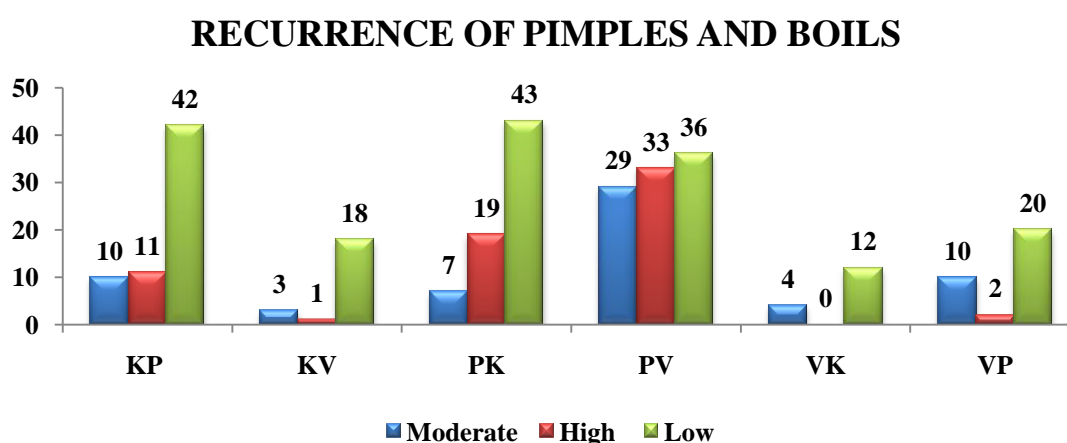
### Observation

In *Vathapithathegi* 11 cases had moderate sweating, 3 cases had high tendency towards sweating and perspiration and 18 cases had low tendency towards sweating and perspiration. In *Vathakapathegi* 4 cases had moderate sweating, 1 case had high tendency towards sweating and perspiration and 11 cases had low tendency towards sweating and perspiration. In *Pithavathathegi* 35 cases had moderate sweating, 27 cases had high tendency towards sweating and perspiration and 36 cases had low tendency towards sweating and perspiration. In *Pithakapathegi* 9 cases had moderate sweating, 16 cases had high tendency towards sweating and perspiration and 44 cases had low tendency towards sweating and perspiration. In *Kapavathathegi* 8 cases had moderate sweating, 4 cases had high tendency towards sweating and perspiration and 10 cases had low tendency towards sweating and perspiration. In *Kapapithathegi* 11 cases had moderate sweating, 8 cases had high tendency towards sweating and perspiration and 44 cases had low tendency towards sweating and perspiration.

## 7.28 RECCURENCE OF PIMPLES AND BOILS

**Table 28 Reccurence Of Pimples and Boils**

Sl.No	THEGAM	Moderate	High	Low
1	<i>Vathapitham</i>	10	2	20
2	<i>Vathakapam</i>	4	0	12
3	<i>Pithavatham</i>	29	33	36
4	<i>Pithakapam</i>	7	19	43
5	<i>Kapavatham</i>	3	1	18
6	<i>Kapapitham</i>	10	11	42



**Fig 29 Recurrence of Pimples and Boils**

### Observation

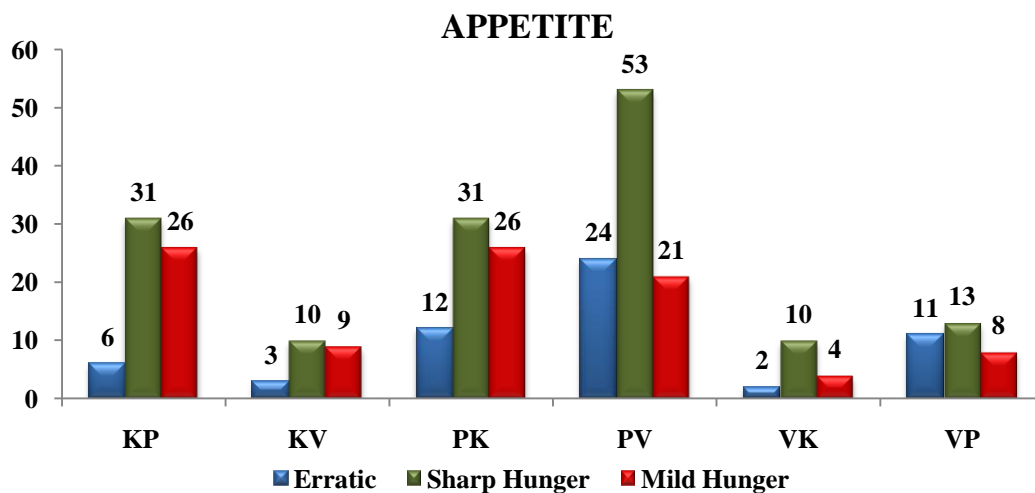
In *Vathapitham* 10 cases had history and complaints of moderate recurrence of pimples and boils, 2 cases had history and complaints of high recurrence of pimples and boils and 20 cases had history and complaints of low recurrence of pimples and boils. In *Vathakapam* 4 cases had history and complaints of moderate recurrence of pimples and boils, no case had history and complaints of high recurrence of pimples and boils and 12 cases had history and complaints of low recurrence of pimples and boils. In *Pithavatham* 29 cases had history and complaints of moderate recurrence of pimples and boils, 33 cases had history and complaints of high recurrence of pimples and boils and 36 cases had history and complaints of low recurrence of pimples and boils. In *Pithakapam* 7 cases had history and complaints of moderate recurrence of pimples and boils, 19 cases had history and complaints of high recurrence of pimples and boils and 43 cases had history and complaints of low recurrence of pimples and boils. In *Kapavatham* 3 cases had history and complaints of moderate recurrence of pimples and boils, 1 case had history and complaints of high recurrence of pimples and boils and 18 cases had history and complaints of low recurrence of pimples and boils. In *Kapapitham* 10 cases had history and complaints of moderate recurrence of pimples and boils, 11 cases had history and complaints of high recurrence of pimples and boils and 42 cases had history and complaints of low recurrence of pimples and boils.

*Kapavathathegi* 3 cases had history and complaints of moderate recurrence of pimples and boils, 1 case had history and complaints of high recurrence of pimples and boils and 18 cases had history and complaints of low recurrence of pimples and boils. In *Kapapithathegi* 10 cases had history and complaints of moderate recurrence of pimples and boils, 11 cases had history and complaints of high recurrence of pimples and boils and 42 cases had history and complaints of low recurrence of pimples and boils.

## **7.29 APPETITE**

**Table 29 Appetite**

Sl.No	THEGAM	Erratic	Sharp Hunger	Mild Hunger
1	<i>Vathapitham</i>	11	13	8
2	<i>Vathakapam</i>	2	10	4
3	<i>Pithavatham</i>	24	53	21
4	<i>Pithakapam</i>	12	31	26
5	<i>Kapavatham</i>	3	10	9
6	<i>Kapapitham</i>	6	31	26



**Fig 30 Appetite**

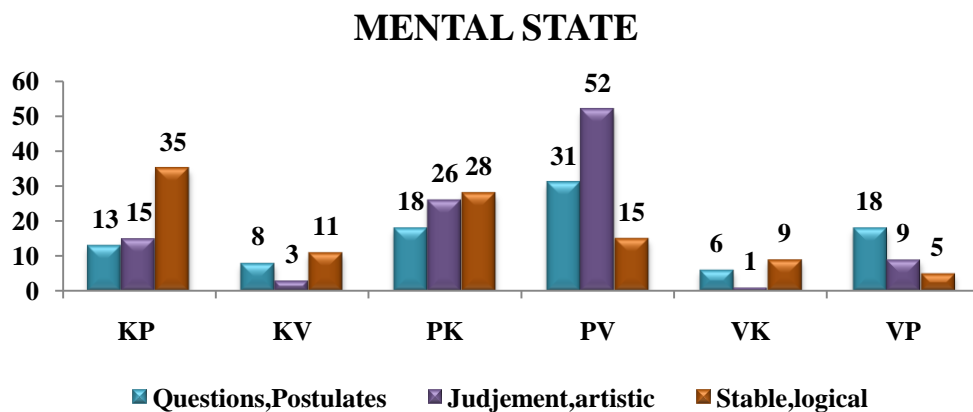
## **Observation**

In *Vathapithathegi* 11 cases had erratic appetite, 13 cases had increased hunger and 8 cases had low hunger. In *Vathakapathegi* 2 cases had erratic appetite, 10 cases had increased hunger and 4 cases had mild hunger. In *Pithavathathegi* 24 cases had erratic appetite, 53 cases had intense hunger and 21 cases had low hunger. In *Pithakapathegi* 12 cases had erratic appetite, 31 cases had increased hunger and 26 cases had low hunger. In *Kapavathathegi* 3 cases had erratic appetite, 10 cases had intense hunger and 9 cases had low hunger. In *Kapapithathegi* 6 cases had erratic appetite, 31 cases had intense hunger and 26 cases had low hunger.

### 7.30 MENTAL STATE

**Table 30 Mental State**

Sl.No	THEGAM	Questions, Postulates	Judgement, artistic	Stable, logical
1	<i>Vathapitham</i>	18	9	5
2	<i>Vathakapam</i>	6	1	9
3	<i>Pithavatham</i>	31	52	15
4	<i>Pithakapam</i>	18	26	28
5	<i>Kapavatham</i>	8	3	11
6	<i>Kapapitham</i>	13	15	35



**Fig 31 Mental State**

### Observation

In *Vathapithathegi* 18 cases had questioning and postulate type of mental tendency, 9 cases had judgement and artistic type of mental tendency and 5 cases had stable and logical mental tendency. In *Vathakapathegi* 6 cases had questioning and postulate type of mental tendency, 1 case had judgement and artistic type of mental tendency and 9 cases had stable and logical mental tendency. In *Pithavathathegi* 31 cases had questioning and postulate type of mental tendency, 52 cases had judgement and artistic type of mental tendency and 15 cases had stable and logical mental tendency. In *Pithakapathegi* 18 cases had questioning and postulate type of mental tendency, 26 cases had judgement and artistic type of mental tendency and 28 cases had stable and logical mental tendency. In *Kapavathathegi* 8 cases had questioning and postulate type of mental tendency, 3 cases had judgement and artistic type of mental tendency and 11 cases had stable and logical mental tendency. In *Kapapithathegi* 13 cases had questioning and postulate type of mental tendency, 15 cases had judgement and artistic type of mental tendency and 35 cases had stable and logical mental tendency.

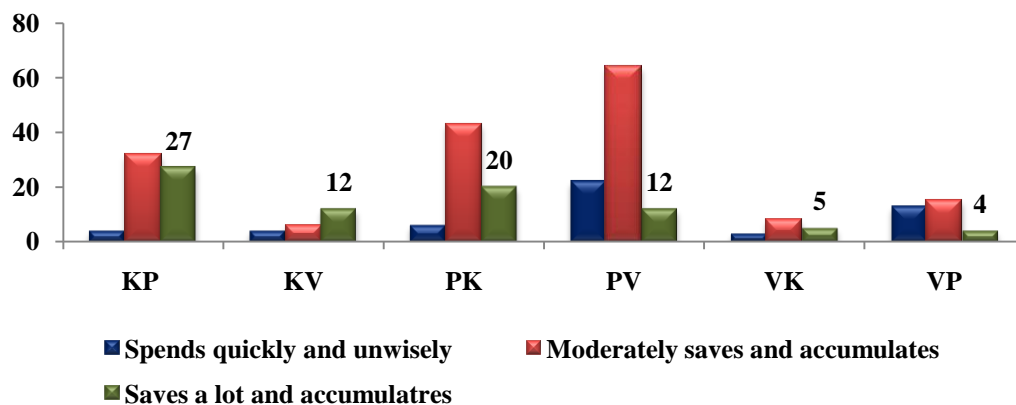


## 7.31 FINANCIAL MANAGEMENT

**Table 31 Financial Management**

Sl.No	THEGAM	Spends quickly and unwisely	Moderately saves and accumulates	Saves a lot and accumulates
1	<i>Vathapitham</i>	13	15	4
2	<i>Vathakapam</i>	3	8	5
3	<i>Pithavatham</i>	22	64	12
4	<i>Pithakapam</i>	6	43	20
5	<i>Kapavatham</i>	4	6	12
6	<i>Kapapitham</i>	4	32	27

### FINANCIAL MANAGEMENT



**Fig 32 Financial Management**

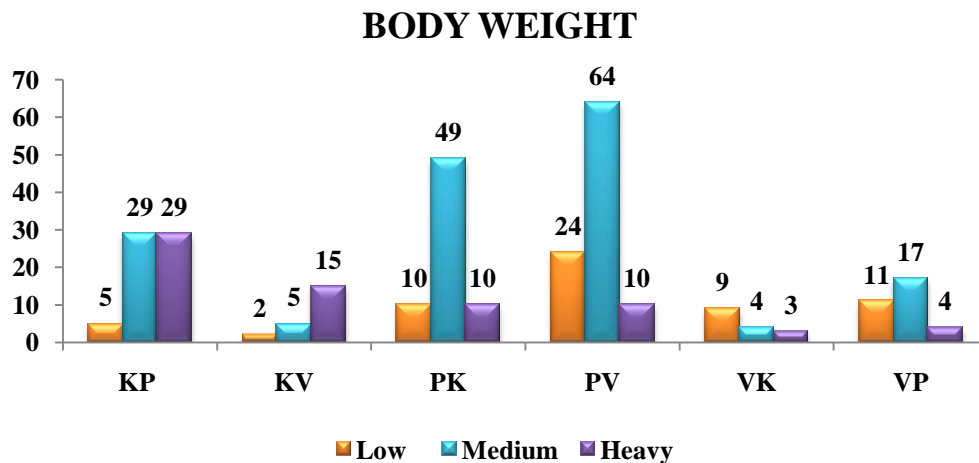
### Observation

In *Vathapitham* 13 cases spend quickly and unwisely, 15 cases moderately save and accumulate and 4 cases save a lot and accumulate. In *Vathakapam*, 3 cases spend quickly and unwisely, 8 cases moderately save and accumulate and 5 cases save a lot and accumulate. In *Pithavatham* 22 cases spend quickly and unwisely, 64 cases moderately save and accumulate and 12 cases save a lot and accumulate. In *Pithakapam* 6 cases spend quickly and unwisely, 43 cases moderately save and accumulate and 20 cases save a lot and accumulate. In *Kapavatham* 4 cases spend quickly and unwisely, 6 cases moderately save and accumulate and 12 cases save a lot and accumulate. In *Kapapitham* 4 cases spend quickly and unwisely, 32 cases moderately save and accumulate and 27 cases save a lot and accumulate.

## 7.32 BODY WEIGHT

**Table 32 Body Weight**

Sl.No	THEGAM	Low	Medium	Heavy
1	<i>Vathapitham</i>	11	17	4
2	<i>Vathakapam</i>	9	4	3
3	<i>Pithavatham</i>	24	64	10
4	<i>Pithakapam</i>	10	49	10
5	<i>Kapavatham</i>	2	5	15
6	<i>Kapapitham</i>	5	29	29



**Fig**

**33 Body Weight**

### Observation

In *Vathapithathegi* 11 cases had low body weight, 17 cases had medium body weight and 4 cases had heavy body weight. In *Vathakapathegi* 9 cases had low body weight, 4 cases had medium body weight and 3 cases had heavy body weight. In *Pithavathathegi* 24 cases had low body weight, 64 cases had medium body weight and 10 cases had heavy body weight. In *Pithakapathegi* 10 cases had low body weight, 49 cases had medium body weight and 10 cases had heavy body weight. In *Kapavathathegi* 2 cases had low body weight, 5 cases had medium body weight and 15 cases had heavy body weight. In *Kapapithathegi* 5 cases had low body weight, 29 cases had medium body weight and 29 cases had heavy body weight.

### 7.33 NATURE OF TEETH

Table 33 Nature of Teeth

Sl.No	THEGAM	Large, Protruding, crooked	Yellowish, moderate	White and large
1	<i>Vathapitham</i>	13	15	4
2	<i>Vathakapam</i>	9	2	5
3	<i>Pithavatham</i>	26	60	12
4	<i>Pithakapam</i>	16	38	15
5	<i>Kapavatham</i>	3	5	14
6	<i>Kapapitham</i>	14	20	29

### NATURE OF TEETH

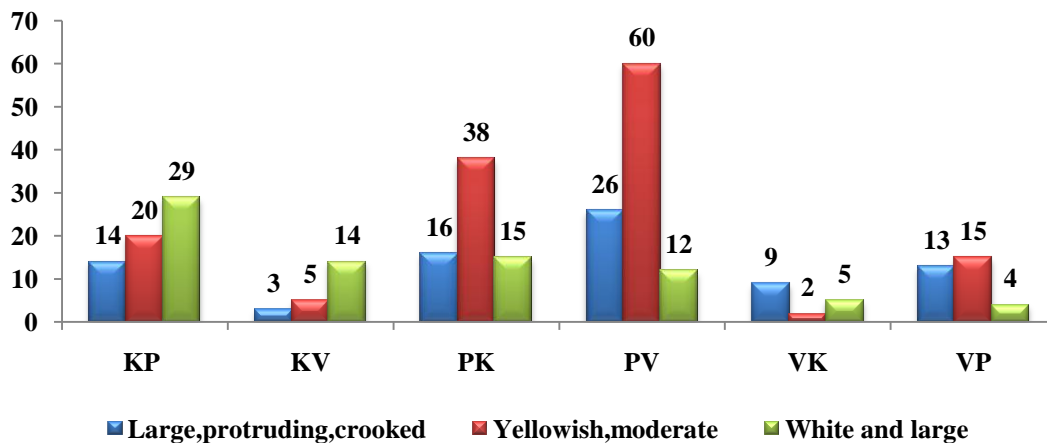


Fig 34 Nature of Teeth

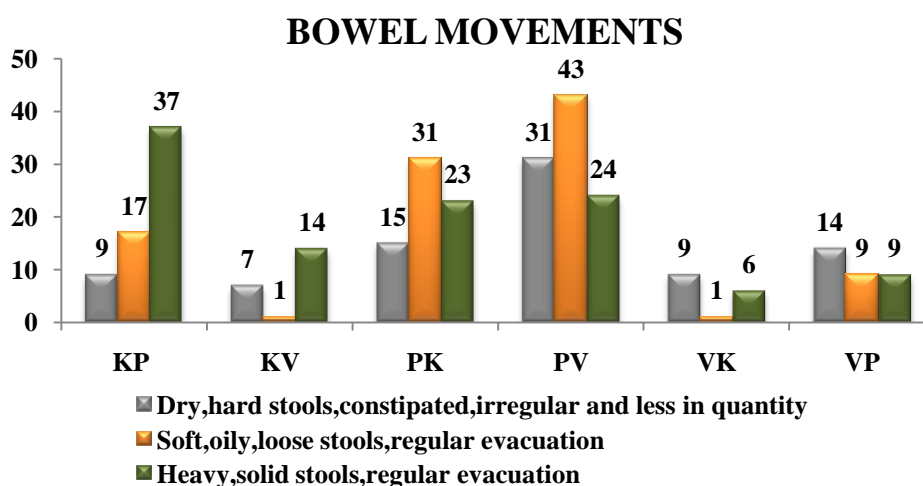
### Observation

In *Vathapitham* 13 cases had large, protruding and crooked teeth, 15 cases had moderate and yellowish teeth and 4 cases had large and white teeth. In *Vathakapam* 9 cases had large, protruding and crooked teeth, 2 cases had moderate and yellowish teeth and 5 cases had large and white teeth. In *Pithavatham* 26 cases had large, protruding and crooked teeth, 60 cases had moderate and yellowish teeth and 12 cases had large and white teeth. In *Pithakapam* 16 cases had large, protruding and crooked teeth, 38 cases had moderate and yellowish teeth and 15 cases had large and white teeth. In *Kapavatham* 3 cases had large, protruding and crooked teeth, 5 cases had moderate and yellowish teeth and 14 cases had large and white teeth. In *Kapapitham* 14 cases had large, protruding and crooked teeth, 20 cases had moderate and yellowish teeth and 29 cases had large and white teeth.

## 7.34 BOWEL MOVEMENTS

**Table 34 Bowel Movements**

Sl.No	THEGAM	Dry, hard stools, constipated, irregular and less in quantity	Soft, oily, loose stools, regular evacuation	Heavy, solid stools, regular evacuation
1	<i>Vathapitham</i>	14	9	9
2	<i>Vathakapam</i>	9	1	6
3	<i>Pithavatham</i>	31	43	24
4	<i>Pithakapam</i>	15	31	23
5	<i>Kapavatham</i>	7	1	14
6	<i>Kapapitham</i>	9	17	37



**Fig 35 Bowel Movements**

### Observation

In *Vathapithathegi* 14 cases had dry, hard stools, constipated, irregular less evacuation, 9 cases had soft, oily, loose stools with regular evacuation and 9 cases had heavy, solid stools with regular evacuation. In *Vathakapathegi* 9 cases had dry, hard stools, constipated, irregular less evacuation, 1 case had soft, oily, loose stools with regular evacuation and 6 cases had heavy, solid stools with regular evacuation. In *Pithavathathegi* 31 cases had dry, hard stools, constipated, irregular less evacuation, 43 cases had soft, oily, loose stools with regular evacuation and 24 cases had heavy, solid stools with regular evacuation. In *Pithakapathegi* 15 cases had dry, hard stools,

constipated, irregular less evacuation, 31 cases had soft, oily, loose stools with regular evacuation and 23 cases had heavy, solid stools with regular evacuation. In *Kapavathathegi* 7 cases had dry, hard stools, constipated, irregular less evacuation, 1 case had soft, oily, loose stools with regular evacuation and 14 cases had heavy, solid stools with regular evacuation. In *Kapapithathegi* 9 cases had dry, hard stools, constipated, irregular less evacuation, 17 cases had soft, oily, loose stools with regular evacuation and 37 cases had heavy, solid stools with regular evacuation.

### 7.35 RESPONSE TO FEAR & STRESS

Table 35 Response to Fear & Stress

Sl.No	THEGAM	Lot of worrying, instability in reaction	Angry, easily provoked and highly irritable	Peaceful, slow, steady and balanced
1	<i>Vathapitham</i>	23	6	3
2	<i>Vathakapam</i>	9	1	6
3	<i>Pithavatham</i>	38	49	11
4	<i>Pithakapam</i>	15	26	28
5	<i>Kapavatham</i>	7	3	12
6	<i>Kapapitham</i>	11	10	42

### RESPONSE TO FEAR & STRESS

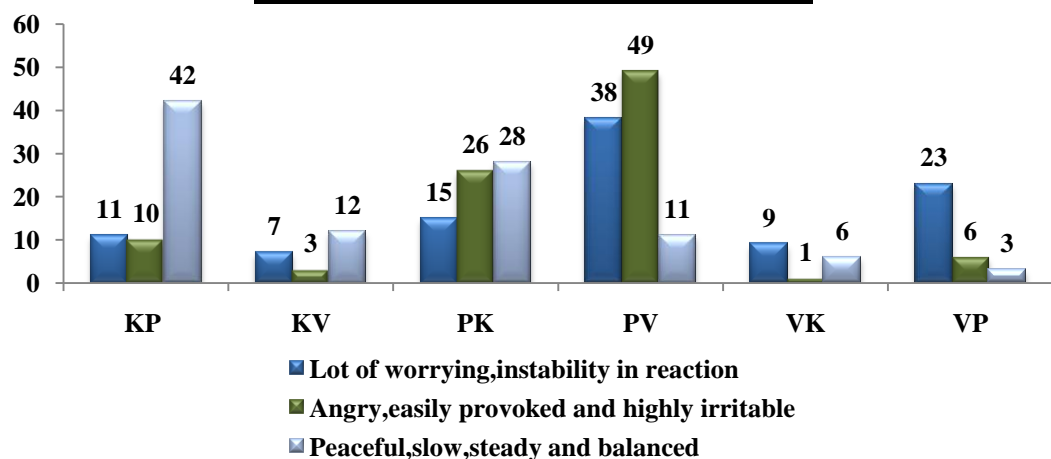


Fig 36 Response to Fear & Stress

### Observation

In *Vathapitham* 23 cases had lot of worrying and instability in reaction when threatened, 6 cases were angry and belligerent when threatened and 3 cases had meek tendency when threatened. In *Vathakapam* 9 cases had lot of worrying and instability in reaction when threatened, 1 case was angry and belligerent when threatened and 6 cases had meek tendency when threatened. In *Pithavatham* 38 cases had lot of worrying and instability in reaction while threat, 49 cases were angry and belligerent when threatened and 11 cases had meek tendency when threatened. In *Pithakapam* 15 cases had lot of worrying and instability in reaction while threat, 26 cases were angry and belligerent when threatened and 28 cases had meek tendency when threatened. In *Kapavatham* 7 cases had lot of worrying and instability in reaction while threat, 3 cases were angry and belligerent when threatened and 12 cases had meek tendency when threatened. In *Kapapitham* 11 cases had lot of worrying and instability in reaction while threat, 10 cases were angry and belligerent when threatened, and 42 cases had meek tendency when threatened.

### 7.36 FRESH FEEL

Table 36 Fresh Feel

Sl.No	THEGAM	Don't feel fresh	Feel well even with less sleep	Feel fresh but not good during decreased sleep
1	<i>Vathapitham</i>	12	18	2
2	<i>Vathakapam</i>	5	6	5
3	<i>Pithavatham</i>	23	58	17
4	<i>Pithakapam</i>	9	49	11
5	<i>Kapavatham</i>	7	5	10
6	<i>Kapapitham</i>	6	28	29

### FRESH FEEL

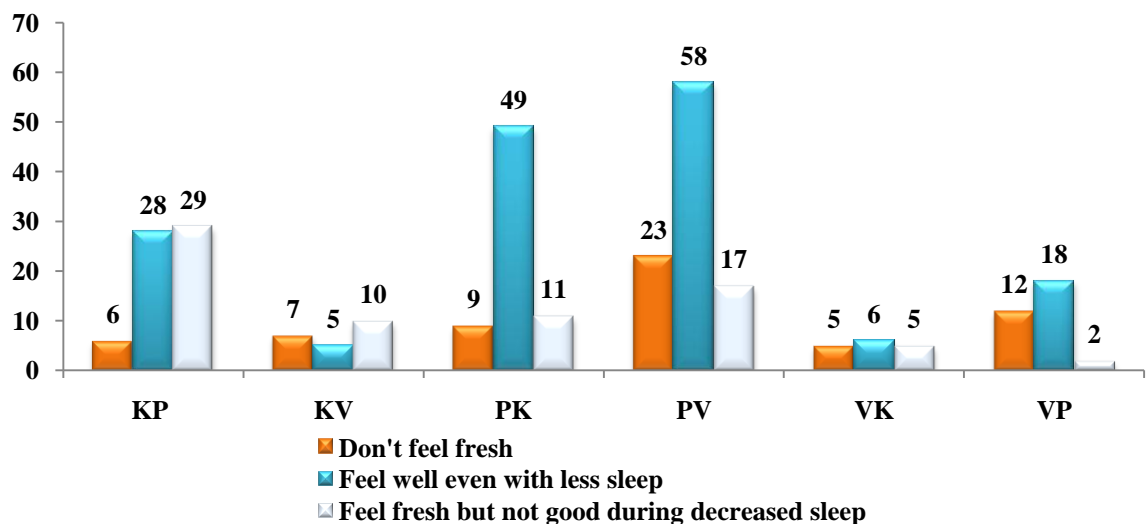


Fig 37 Fresh Feel

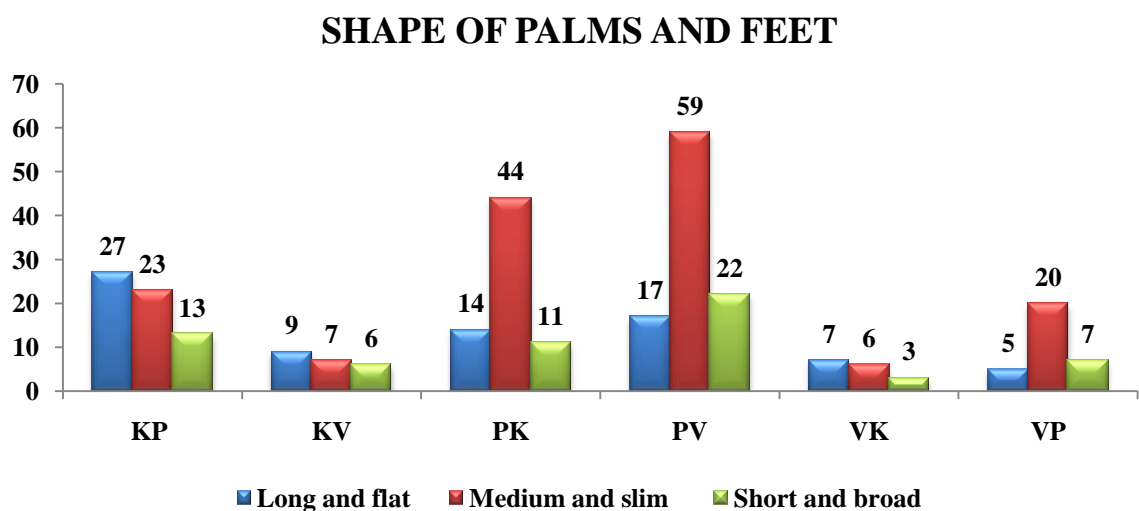
### Observation

In *Vathapitham* 12 cases don't feel fresh while woke up, 18 cases feel well even with less sleep and 2 cases feel fresh but not good during decreased sleep. In *Vathakapam* 5 cases don't feel fresh while woke up, 6 cases feel well even with less sleep and 5 cases feel fresh but not good during decreased sleep. In *Pithavatham* 23 cases don't feel fresh while woke up, 58 cases feel well even with less sleep and 17 cases feel fresh but not good during decreased sleep. In *Pithakapam* 9 cases don't feel fresh while woke up, 49 cases feel well even with less sleep and 11 cases feel fresh but not good during decreased sleep. In *Kapavatham* 7 cases don't feel fresh while woke up, 5 cases feel well even with less sleep and 10 cases feel fresh but not good during decreased sleep. In *Kapapitham* 6 cases don't feel fresh while woke up, 28 cases feel well even with less sleep and 29 cases feel fresh but not good during decreased sleep.

### **7.37 SHAPE OF PALMS AND FEET**

**Table 37 Shape of Palms and Feet**

Sl.No	THEGAM	Long and flat	Medium and slim	Short and broad
1	<i>Vathapitham</i>	5	20	7
2	<i>Vathakapam</i>	7	6	3
3	<i>Pithavatham</i>	17	59	22
4	<i>Pithakapam</i>	14	44	11
5	<i>Kapavatham</i>	9	7	6
6	<i>Kapapitham</i>	27	23	13



**Fig 38 Shape of Palms and Feet**

### **Observation**

In *Vathapithathegi* 5 cases had long and flat extremities, 20 cases had medium and slim extremities and 7 cases had short and broad extremities. In *Vathakapathegi* 7 cases had long and flat extremities, 6 cases had medium and slim extremities and 3 cases had short and broad extremities. In *Pithavathathegi* 17 cases had long and flat extremities, 59 cases had medium and slim extremities and 22 cases had short and broad extremities. In *pithakapathegi* 14 cases had long and flat extremities, 44 cases had medium and slim extremities and 11 cases had short and broad extremities. In *Kapavathathegi* 9 cases had long and flat extremities, 7 cases had medium and slim extremities and 6 cases had short and broad extremities. In *Kapapithathegi* 27 cases had long and flat extremities, 23 cases had medium and slim extremities and 13 cases had short and broad extremities.



## **7.38 INFERENCE STATISTICS**

### **Reliability test for Questionnaire<sup>[8]</sup>**

Cronbach's alpha is the most common measure of internal consistency ("reliability"). It is most commonly used when you have multiple Likert questions in a survey/questionnaire that form a scale and required to determine if the scale is reliable.

**Table 38- Reliability Statistics**

Reliability Statistics	
Cronbach's Alpha	N of Items
.655	35

The Cronbach's Alpha is 0.655, it indicates good internal consistency.

**Table 39 –Total Statistics**

Item-Total Statistics				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
Q1	64.13	60.157	.197	.647
Q2	63.72	60.113	.242	.645
Q3	64.12	58.430	.337	.636
Q4	63.94	58.935	.325	.638
Q5	63.96	59.725	.294	.642
Q6	63.95	59.627	.331	.640
Q7A(Sweet)	64.01	61.118	.028	.667
Q7B(Sour)	64.99	62.862	-.058	.673
Q7C(Salt)	65.27	62.344	-.014	.666
Q7D(Bitter)	65.12	61.568	.030	.663
Q7E(Astringent)	65.40	61.803	.034	.661

Q7F(Pungent)	64.43	61.862	-.024	.676
Q8	63.76	58.310	.343	.636
Q9	63.91	60.139	.186	.648
Q10	64.01	58.141	.351	.635
Q11	64.02	59.205	.316	.639
Q12	63.80	58.581	.338	.637
Q13	64.04	56.937	.411	.629
Q14	63.78	58.619	.324	.637
Q15	63.80	59.998	.196	.647
Q16	63.88	59.592	.251	.643
Q17	63.70	59.956	.233	.645
Q18	63.80	60.988	.145	.651
Q19	63.76	60.192	.191	.648
Q20	63.63	62.953	-.048	.667
Q21	63.57	62.280	.008	.662
Q22	63.81	59.987	.234	.645
Q23	63.91	58.395	.325	.637
Q24	63.83	60.028	.253	.644
Q25	63.90	59.353	.317	.640
Q26	63.93	59.261	.286	.641
Q27	63.83	59.218	.255	.642
Q28	63.93	57.345	.400	.630
Q29	63.89	59.765	.269	.643
Q30	63.99	65.198	-.239	.675

Cronbach's Alpha if Item Deleted, presents the value that Cronbach's alpha would be if that particular item was deleted from the scale. And we can also see that the **"Corrected Item-Total Correlation"** value was low for items Q21, Q7F, Q7C, Q7B, Q7A, Q7E, Q7D and Q20. This might lead us to consider whether we should remove this item.<sup>[8]</sup>

**Table 40- Reliability Statistics**

Reliability Statistics	
Cronbach's Alpha	N of Items
.765	27

The Cronbach's Alpha is 0.765, it indicates good internal consistency.

Note:- The reliability coefficient of .70 or higher is considered “acceptable” in most social science research situations.

**Table 41- Total Statistics**

Item-Total Statistics				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
Q1	53.15	52.730	.228	.761
Q2	52.75	52.499	.298	.757
Q3	53.13	51.271	.353	.754
Q4	52.96	51.840	.333	.755
Q5	52.97	51.969	.372	.754
Q6	52.97	52.744	.311	.757
Q8	52.78	50.802	.391	.751
Q9	52.92	53.866	.114	.768
Q10	53.03	50.761	.390	.751
Q11	53.03	51.603	.375	.753
Q12	52.81	51.913	.307	.757
Q13	53.06	50.187	.399	.750

Q14	52.79	51.449	.340	.755
Q15	52.82	52.097	.269	.759
Q16	52.90	51.759	.326	.755
Q17	52.71	52.568	.264	.759
Q18	52.82	53.122	.219	.761
Q19	52.77	52.158	.279	.758
Q22	52.83	53.272	.199	.762
Q23	52.92	51.336	.332	.755
Q24	52.85	52.752	.274	.758
Q25	52.91	51.921	.359	.754
Q26	52.95	51.987	.311	.756
Q27	52.85	51.998	.271	.759
Q28	52.94	49.967	.441	.748
Q29	52.90	53.222	.216	.761
Q30	53.00	58.060	-.261	.785

Cronbach's alpha	Internal consistency
$\alpha \geq 0.9$	Excellent
$0.9 > \alpha \geq 0.8$	Good
$0.8 > \alpha \geq 0.7$	Acceptable
$0.7 > \alpha \geq 0.6$	Questionable
$0.6 > \alpha \geq 0.5$	Poor
$0.5 > \alpha$	Unacceptable

### **7.39 RELATION BETWEEN PATIENTS AND HEALTHY VOLUNTEERS**

**Table 42- Relation between patients and healthy volunteers**

<i>THEGAM</i>	Diseased persons	Healthy volunteers	Total
KP	40	23	63
KV	11	11	22
PK	37	32	69
PV	39	59	98
VP	14	18	32
VK	9	7	16

Pearson  $\chi^2(5) = 9.7813$  Pr = 0.082

Here the probability value is 0.082 which shows no significant difference in the body constitution of healthy volunteers and patients.

## 8: DISCUSSION

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The trihumoural theory is the foundation stone of the Siddha system which plays a main role in the diagnosis and prognosis of a disease. A correct understanding about the basic principles is very necessary for an effective treatment. It also paves the right way for drug selection which is essential for a good clinical practice. *UdalIlakkanam* persists as such throughout the lifetime of an individual. Here the body constitution of participants is enrolled on the basis of questionnaire. Body constitution can be categorized even based on the genomics and proteomics of the individual.

It is essential to standardize the basics in Siddha literature to validate further research. Such research if done would be cost effective and will help to prevent the suspected diseases predisposed for each body constitution. The body constitution was analyzed by giving equal weightage to all options given for each questionnaire. The predisposed body characters were finally grouped and assumed as the *UdalIlakkanam* for each individual.

In this study the author had included patients from the Out Patient Department of National Institute of Siddha and healthy volunteers each of 150 participants. Among 300 participants, evaluation of *UdalIlakkanamis* congruent to the literary description. Also, throughout the period of observation there was no change in the body constitution of patients and healthy volunteers. The reliability of the questionnaire was assessed by using Cronbach's Alpha Coefficient method and found agreeable with literature. The probability value was also calculated to analyze whether the body constitutions were subjected to change during the onset of any disease.

### **Distribution of cases by age group**

Majority of the cases belonged to 20-30 age group (33%) and 60-70 age group (26%).

### **Distribution of cases by gender distribution**

In male group 69 cases were diseased persons and remaining 55 subjects belonged to healthy volunteers. In female group 81 cases were diseased persons and remaining 95 subjects belonged to healthy volunteers. The overall composition of females is 59% and males are 41%.

### **Distribution of cases by complexion**

Many of the *Pithavathamthegi* individuals had dark and light at mixed complexion. Many participants had fair complexion with rose tint in *Pithavathamthegi* group. Many of the *Kapapithamthegi* had complexion with yellowish and rose tint.

### **Distribution of cases by skin characters**

Out of 300 cases, *Pithavathamthegi* and *Vathapithamthegi* showed up with very dry skin. Many of the *Pithavathamthegi* had moderately dry and wrinkled skin and sizable number of the *Kapapithamthegi* had smooth and supple skin. The observed data is agreeable with the literature characteristics and hence the data is tenable.

### **Distribution of cases by hair characters**

In *Kapapitham* and *Kapavatham* body constitutions many of the participants had dark and healthy hair, thus conforming to the features of the above *Thegis* mentioned in the *SathagaNaadiliterature*. Same is the case with *Pithavatham* and *Pithakabam thegi* individuals also.

### **Distribution of cases by eye color**

*Pithavatham* and *Pithakabam* body constitutions many of the participants had sclera of the eyes yellowish to red tinged colour, *Kapavathamthegi* had bright and white sclera in large proportion and *Vathapitham* constitution individuals had broad eyes with whitish sclera. The above data substantiates the literature.

### **Distribution of cases by body built**

According to the study *Vathapitham*, *Vathakapam*, *Pithavatham*, *Pithakapam* and *Kabavatham* matches well with the literature characteristic. But *Kapapitham* constitution individuals did not match well in proportion.

### **Distribution of cases by pitch of voice**

Many of the *Pithavatham* and *Pithakabam* body constitutions had medium pitched voice. *Kapapithamthegi* had participants with bass pitched voice in large number. The results of *Vathapithamthegi* and *Vathakabamthegi* did not match well in proportion.

### **Distribution of cases by affinity towards sweet taste**

All of the body compositions showing affinity to sweet taste even though *Kabapitham* and *Pithakabam* were having high affinity when compared with others. Hence this outcome apparently matches with the literature.

### **Distribution of cases by affinity towards sour taste**

In literature we get to find that individuals with *Pithavathamthegi*, *Kapapithamthegi* and *Pithakapamthegi* would have a liking to sour taste while the results of the study indicate that *Pithavathamthegi* alone to have a more affinity to sour taste. The results of *Kapapithamthegi* and *Pithakapamthegi* are not matching with that of literature.

### **Distribution of cases by affinity towards salt taste**

According to the literature *Kabam* and *PithamThegi* are said to have more affinity to salt taste and *Vathathegi* a little affinity to salt taste. In the study it was observed that *Kabapithamthegi* and *Pithavathamthegi* had more affinity to salt taste which is congruent to the literary statement.

### **Distribution of cases by affinity towards bitter taste**

*PithakabaThegam* had more affinity to bitter taste in this study. In literature it is mentioned that *PithaThegam* and *KabaThegam* had more inclination towards bitter taste. Hence the outcome is somewhat agreeable with literature.

### **Distribution of cases by affinity towards astringent taste**

In literature it is given that *Vathapithamthe* constitution people would have more affinity to astringent taste. In this study many of the subjects did not have any affinity to astringent taste and hence it is difficult to substantiate with literature.

### **Distribution of cases by affinity towards pungent taste**

According to the literature *Pithavathathegi* individuals are said to have more affinity to pungent taste. In the study it was observed that *Pithavathathegi* individuals had more affinity to pungent taste which is congruent to the literary statement.



### **Distribution of cases according to ability in decision making**

In this study the *Kabavatha* and *Kabapithathegi* participants were good at decision making which is able to substantiate the literature.

### **Distribution of cases according to ability in friend making**

In this study *Kabapithathegi* individuals had the good quality of making friends when compared with others. Hence the data is substantiable with the literature.

### **Distribution of cases according to characters of teeth**

In this study large, even and gleaming dentition with white teeth were found in larger proportion of *Kapapithathegam* individuals. *Pithakapathegam* and *Pithavathathegi* shows dry, cracked and irregular dull white tooth in large proportion. *Vathapithathegam* shows tooth with average size, yellowish and prone to cavities in large proportion. Hence the result is agreeable with the literature.

### **Distribution of cases according to characters of lips**

In this study *Kapapitha* and *Kapavathathegam* showed thick and glossy lips in higher proportion. *Pithakapa* and *pithavathathegam* showed higher proportion with dry, thin and blackish lips. *Vathakapa* and *Vathapithathegam* showed higher proportion with soft, moist and reddish lips. The above findings corroborate with the literature.

### **Distribution of cases according to sleep pattern**

In *Vathapitha* and *Vathakapathegam* participants, higher proportion of them had poor sleep. *Pithavatha* and *Pithakapathegi* individuals had higher proportion of subjects with moderate sleep. *Kapapitha* and *Kapavathathegi* individuals had higher proportion of subjects with sound sleep. Hence the outcome of the study is substantiable with the literature.

### **Distribution of cases according to dream details**

In this study *Vathapitha* and *Vathakapathegi* individuals had dreams like walking in forest, hills and sky in higher proportion. *Pithavatha* and *Pithakapathegi* individuals had dreams like watching trees, flowers, lightening, sun and fire in higher proportion. *Kapavatha* and *Kapapithathegi* individuals had dreams like watching birds, lotus bound ponds and cooling clouds in higher proportion. Hence the outcome of this study is substantiable with the literature.

### **Distribution of cases according to memory**

In this study most of the *Kabapitha* and *Kabavathathegi* individuals had good memory. Most of the *Pithakaba* and *Pithavathathegi* individuals had good but not prolonged memory. Many of the *Vathapitha* and *Vathakabathegi* individuals had low memory. Hence the outcome of the study is substantiable with the literature.

### **Distribution of cases according to hunger tolerance**

*Kabapitha* and *Kabavathathegi* individuals had better hunger tolerance than others. Hunger tolerance is poor in *Pithavathathegi* and *Pithakabathegi* individuals as majority. *Vathakaba* and *Vathapithathegi* individuals reported that they were able to tolerate hunger to some extent.

### **Distribution of cases according to temperament**

Majority of *Kabapitha* and *Kabavathathegi* individuals were said to be of patient in nature. *Pithakaba* and *Pithavathathegi* individuals reported that they had very less ability to hold temper. *Vathakabathegi* individuals had good control over their temper. The above findings corroborate with the literature.

### **Distribution of cases according to crackling sound of joints**

Majority (18%) of *Kabapitha* and *Kapavathathegi* individuals had not experienced crackling sound of joints. Majority (16%) of *Pithakaba* and *Pithavathathegi* individuals had sometimes experienced crackling sound of joints. Majority (5%) of *Vathapithathegi* individuals frequently experienced crackling sound of joints. The observed data is agreeable with the literature characteristics and hence the data is tenable.

### **Distribution of cases according to recurrence of cold attacks**

In this study majority of *Kabavathathegi* individuals often had bouts of cold attacks. Majority of *Pithavathathegi* individuals not very often experienced cold attacks. Majority of *Vathapithathegi* individuals less frequently experienced cold attacks. Therefore, the study substantiates with the literature.

### **Distribution of cases according to body warmth**

Very few of *Kabavatha* and *Kabapithathegi* individuals had increased body warmth. Majority of *Pithakaba* and *Pithavathathegi* individuals had increased body warmth. Very few of *Vathapithathegi* individuals had reduced body warmth. Hence the outcome of this study is agreeable with the literature.

### **Distribution of cases according to propensity towards sweating**

Almost all body constitution individuals are showing low propensity towards sweating in this study though the text states that *Pithavatha* and *Pithakapathegi* individuals shows high propensity towards sweating and perspiration.

### **Distribution of cases according to recurrence of pimples**

Majority of the participants in this study had low recurrence of pimples though *Pithavatha* and *Pithakabathegi* individuals had moderate recurrence of pimples. Hence the outcome is not able to substantiate the literature completely.

### **Distribution of cases according to appetite**

Majority of the *Pithakapa* and *Pithavathathegam* subjects had increased appetite. The results of other body compositions are not matching with the literature.

### **Distribution of cases according to mental state**

Majority of the *Kapapitha* and *Kapavathathegam* individuals are having stable and logical mental tendency. Majority of *Pithakapa* and *Pithavatha* subjects having judgmental mind. Majority of *Vathakapa* and *Vathapitha* subjects are having mental tendency with a lot of questions and postulates. Hence the data is able to substantiate the literature completely.

### **Distribution of cases according to financial management**

Majority of *Pithakapa* and *Pithavatha* subjects had moderate financial management. Majority of *Kapavatha* and *Kapapitha* subjects had better financial management. Since the results of *Vathapitha* and *Vathakapathegam* are not matching, it is not able to substantiate the literature completely

### **Distribution of cases according to body weight**

Majority of *Pithavatha* and *Pithakapathegam* subjects had normal body weight. Majority of *Kapavatha* and *Kapapithathegam* subjects are obese. Majority *Vathapitha* and *Vathakapa* subjects had low body weight. Hence the data is able to substantiate with the literature completely.

### **Distribution of cases according to nature of teeth**

Majority of *Kapapitha* and *Kapavathathegam* subjects had large and white tooth. Majority of the *Pithavatha* and *Pithakapathegam* subjects had moderate and yellowish tooth. Majority of the *Vathapitha* and *Vathakapathegam* subjects had large, protruding and crooked tooth. Hence the data is agreeable with the literature.

### **Distribution of cases according to bowel movements**

Majority of *Kapapitha* and *Kapavathathegi* individuals had formed stools with regular evacuation. Majority of *Pithavatha* and *Pithakapathegi* individuals had soft, greasy, with regular evacuation. Majority of *Vathapitha* and *Vathakabathegi* individuals had irregular and hard stools, constipated and less in quantity. Hence it is able to substantiate with the literature.

### **Distribution of cases according to fear and stress**

Majority of *Kapapitha* and *Kapavathathegi* individuals used to maintain their cool when threatened. Majority of *Pithakapa* and *Pithavathathegi* individuals used to lose their temper, easily provoked and highly irritable response when threatened. Majority of *Vathakapa* and *Vathapithathegi* individuals had lot of worrying and instability in response when threatened. Hence it is able to substantiate with the literature.

**Distribution of cases according to fresh feel**

Majority of *Kabapitha and Kabavathathegi* individuals used to feel fresh upon making up in the morning. Majority of *Pithavatha and Pithakabathegi* individuals used to feel well even with less sleep upon making up in the morning.

**Distribution of cases according to shape of palms and feet**

Majority of *Pithavatha and Pithakapathegam* subjects had medium and slim extremities which is able to substantiate with the literature.

## 9: SUMMARY AND CONCLUSION

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*UdalIlakkanam* constitutes the physical and mental wellbeing of an individual. The three vital humours are to be in equilibrium state in a healthy individual. Siddha system primarily aims to treat the root cause of the disease by analysing the deranged humours. Rather than giving symptomatic treatment it is the need of the hour to standardize the basic principles which will give ultimate cure to mankind. The evaluation of *UdalIlakkanam* is cost effective and it helps to choose the appropriate lifestyle. The external and internal factors are responsible for the state of equilibrium of an individual's body.

In this study the body constitution of the participants is found to be matching with that of literary description. Statistical analysis was also done and the reliability of the questionnaire was found to be having good internal consistency. The questionnaire can be used by the Siddha practitioners which helps to assess the inherent body features and also helps in designing a correct lifestyle and diet regimen.

The assessment of *UdalIlakkanam* needs more standardization in the cases of particular tastes said to each temperament and also the predisposed diseases in each body constitution. We can prevent the suspected diseases by following the diet regimen recommended for a particular individual. The root cause of any disease is the derangement of the equilibrium of three humours and has got nothing to do with the *Thegi* status of the individual which is unchangeable. The set of body features mentioned under each *Thegi* type correlates well with the observed healthy volunteers and patients. Hence it is concluded that the group of features mentioned under *Thegi* types validated.

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# NATIONAL INSTITUTE OF SIDDHA

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F.No.NIS/6-20/Res/IEC/17-18

Date: 28-12-2017

## CERTIFICATE

<b>Address of Ethics Committee: National Institute of Siddha, Tambaram Sanatorium, Chennai-600047, Tamil Nadu, India</b>	
<b>Principal Investigator: Dr.D.Kalanidhi, M.D(S) – II year, Department of Noi Naadal - Dissertation –</b>	
<b>Protocol title: Evaluation and standardisation of "UDAL ILAKKANAM" based on Siddha concepts.</b>	
<b>Documents filed</b>	1) Protocol, 2) Data Collection forms 3) Patient Information Sheet 4) Consent form 5) SAE(Pharmacovigilance)
<b>Clinical trial Protocol (others – Specify)</b>	Yes
<b>Informed consent documents</b>	Yes
<b>Any other documents</b>	-
<b>Date of IEC approval &amp; its number</b>	NIS/13-IEC/2017-1-21/ 22-11-2017

We approve the trial to be conducted in its presented form.

The Institutional Ethics Committee expects to be informed about the progress of the study, Review periodically, any SAE occurring in the course of the study, any changes in the protocol and submission of final report

*S. Suresh Kumar*  
Chairman

*V. Banu*  
Member Secretary







Ministry of AYUSH

# NATIONAL INSTITUTE OF SIDDHA

Ministry of AYUSH, Government of India

Tambaram Sanatorium, Chennai - 600 047.



## WORKSHOP ON RESEARCH METHODOLOGY & BIOSTATISTICS

This is to certify that

Dr. .... **KALANIDHI** .....

has participated in the above Workshop held from 16.04.2018 to 20.04.2018 conducted by the

Dept. of Noi Naadal, at National Institute of Siddha, Tambaram Sanatorium, Chennai-600 047.

*Dr. G.J. Christian*

**Dr. G.J. Christian**

Coordinator

HoD, Dept. of Noi Naadal,

National Institute of Siddha

*V. Banumathi*  
**Prof. Dr. V. Banumathi**

Director,

National Institute of Siddha

Chennai - 600 047.

CERTIFICATE

***DEPARTMENT OF NOI NAADAL***  
***NATIONAL INSTITUTE OF SIDDHA, CHENNAI – 47***

**“EVALUATION AND STANDARDISATION OF UDAL ILAKKANAM  
BASED ON SIDDHA CONCEPTS”**

**FORM I SCREENING AND SELECTION PROFORMA**

1. O.P.No \_\_\_\_\_ 2. I.P No \_\_\_\_\_ 3. Bed No: \_\_\_\_\_ 4. Sl.no: \_\_\_\_\_

5. Name: \_\_\_\_\_ 6. Age (years):  7. Gender: M ☐ F ☐

8. Occupation: \_\_\_\_\_ 9. Income: \_\_\_\_\_

10. Address:

.....

.....

.....

11. Contact Nos: -----

12. E-mail : -----

### **INCLUSION CRITERIA**

	Yes	No
○ Age 20-70	<input type="checkbox"/>	<input type="checkbox"/>
○ Healthy volunteers	<input type="checkbox"/>	<input type="checkbox"/>
○ NIS OPD and IPD patient	<input type="checkbox"/>	<input type="checkbox"/>

### **EXCLUSION CRITERIA**

	Yes	No
○ Mentally retarded patients	<input type="checkbox"/>	<input type="checkbox"/>
○ Vulnerable groups	<input type="checkbox"/>	<input type="checkbox"/>
○ Severely ill patients	<input type="checkbox"/>	<input type="checkbox"/>

**Date :**

**P.G Student**

**Lecturer**

**DEPARTMENT OF NOI NAADAL**  
**NATIONAL INSTITUTE OF SIDDHA, CHENNAI – 47**  
**“EVALUATION AND STANDARDISATION OF UDAL ILAKKANAM**  
**BASED ON SIDDHA CONCEPTS”**

**FORM II - HISTORY PROFORMA**

1. Sl.No of the case: \_\_\_\_\_

2. Name: \_\_\_\_\_ Height: \_\_\_\_\_ cms Weight: \_\_\_\_\_  
Kg

3. Age (years): \_\_\_\_\_ DOB 

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--	--	--	--

  
D D M M Y E A R

4. Educational Status:

1) Illiterate ☐ 2) Literate ☐ 3) Student ☐ 4) Graduate/Postgraduate ☐

5. Nature of work:

1) Sedentary work ☐

2) Field work with physical labour ☐

3) Field work Executive ☐

6. Complaints and Duration:

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7. History of present illness:

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---

---

---

8. History of illness:

	1. Yes	2. No
Systemic hypertension	<input type="checkbox"/>	<input type="checkbox"/>
Ischemic heart disease	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis B and C	<input type="checkbox"/>	<input type="checkbox"/>

Diabetes mellitus

☐☐

Bronchial asthma

☐☐

Past History:

Any drug allergy

☐☐

Any surgeries

☐☐

Any major illnesses

☐☐

9. Habits:

1. Yes

2. No

Smoker

☐☐

Alcoholic

☐☐

Drug Addiction

☐☐

Betel nut chewer:

☐☐

Tea

☐☐

Coffee

☐☐

Milk

☐☐

Tobacco and Pan chewing

☐☐

## DIET HISTORY

Type of diet

V ☐

M

☐

VEGETARIAN FOODS

1. Yes

2. No

☐☐

NON VEGETARIAN FOODS -

## 10. Personal history:

Marital status: Married ☐ Unmarried ☐

No. of children: Male: \_\_\_\_\_ Female: \_\_\_\_\_

Socio economic status:

## 11. Family history:

12. Menstrual & Obstetric history:

Age at menarche \_\_\_\_\_ years

Gravidity ☐ Parity ☐

Duration of the menstrual cycle:

Constancy of cycle duration: 1.Regular ☐ 2.Irregular ☐

13. Occupational history:

14. NOI UTRA KALAAM

1. Kaarkaalam	<input type="checkbox"/>	2.Koothirkaalam	<input type="checkbox"/>
(Aug15-Oct14)		(Oct15-Dec14)	

3. Munpanikaalam	<input type="checkbox"/>	4.Pinpanikaalam	<input type="checkbox"/>
(Dec15-Feb14)		(Feb15-Apr14)	

5. Ilavenirkaalam	<input type="checkbox"/>	6.Muthuvenirkaalam	<input type="checkbox"/>
(Apr15-June14)		(June15-Aug14)	



### 15. NOI UTRA NILAM

- |                               |                          |                             |                          |                         |                          |
|-------------------------------|--------------------------|-----------------------------|--------------------------|-------------------------|--------------------------|
| 1. Kurunji<br>(Hilly terrain) | <input type="checkbox"/> | 2. Mullai<br>(Forest range) | <input type="checkbox"/> | 3. Marutham<br>(Plains) | <input type="checkbox"/> |
| 4. Neithal<br>(Coastal belt)  | <input type="checkbox"/> | 5. Paalai<br>(Desert)       | <input type="checkbox"/> |                         |                          |

Date :

P.G Student

Faculty

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**FORM III -CLINICAL ASSESSMENT**

1. Serial No: \_\_\_\_\_

2. Name: \_\_\_\_\_

3. Date of birth:    DD        MM        YR  

4. Age: \_\_\_\_\_ years

5. Date: \_\_\_\_\_

**DHEGI QUESTIONNAIRE**

1) Complexion

- |                                  |                          |
|----------------------------------|--------------------------|
| a. Dark to brown                 | <input type="checkbox"/> |
| b. Wheatish brown to olive brown | <input type="checkbox"/> |
| c. Fair to pink                  | <input type="checkbox"/> |

2) Texture of skin

- |                                 |                          |
|---------------------------------|--------------------------|
| a. Very dry                     | <input type="checkbox"/> |
| b. Moderately dry with wrinkles | <input type="checkbox"/> |
| c. Smooth and supple            | <input type="checkbox"/> |

3) What is the nature of your hair?

- |                         |                          |
|-------------------------|--------------------------|
| a. Dark with split ends | <input type="checkbox"/> |
| b. Pale yellow          | <input type="checkbox"/> |
| c. Dark and healthy     | <input type="checkbox"/> |

4) Colour of eyes

- |  |                          |
|--|--------------------------|
| a. Broad and sclera looks like white in colour | <input type="checkbox"/> |
| b. Sclera looks mild yellow to red             | <input type="checkbox"/> |
| c. Sclera looks bright and white               | <input type="checkbox"/> |

5) Body built

- |                   |                          |
|-------------------|--------------------------|
| a. Thin           | <input type="checkbox"/> |
| b. Moderate       | <input type="checkbox"/> |
| c. Stout or obese | <input type="checkbox"/> |

6) Pitch

- a. Low pitch ☐
- b. Medium pitch ☐
- c. High pitch ☐

7) Affinity to taste

i. Just tick in the following table what taste does you like most?

Sl.no	Taste	High	Moderate	Low
1	Sweet			
2	Sour			
3	Salt			
4	Bitter			
5	Astringent			
6	Pungent			

8) How will you grade your ability in decision making?

- a. Poor ☐
- b. Moderate ☐
- c. High ☐

9) How will you rate your ability in friend making?

- a. Poor ☐
- b. Moderate ☐
- c. Good ☐

10) Will you respect elders?

- a. Don't like ☐
- b. Moderate respect ☐
- c. Very respectful ☐

11) How is your sleep pattern?

- a. Poor , lasting 4-5hrs ☐
- b. Moderate, lasting 5-7hrs ☐
- c. Sound, lasting for 8hrs ☐

12) What type of dreams do you experience often?

- a. Walking in forest, hills and sky ☐
- b. Trees, flowers, lightening, sun, fire ☐
- c. Birds, lotus bound pounds, cooling clouds ☐

13) How will you rate your memory?

- a. Short term ☐
- b. Good but not prolonged ☐
- c. Long term ☐

- 14) How will you rate your capacity to tolerate hunger?
- a. Can tolerate well ☐
  - b. Cannot tolerate ☐
  - c. Can tolerate well ☐
- 15) Can you tolerate temper?
- a. Can tolerate well
  - b. Cannot tolerate ☐
  - c. Very patient ☐  
☐
- 16) How often do you hear the crackling sound of joints?
- a. Often heard
  - b. Sometimes heard ☐
  - c. Not heard ☐  
☐
- 17) How frequently you are prone to cold affection and phlegm accumulation in your throat?
- a. Sometimes ☐
  - b. Rarely ☐
  - c. Often ☐
- 18) How will you rate your body's tendency to heat up rapidly?
- a. Sometimes ☐
  - b. Often ☐
  - c. Rarely ☐
- 19) How will you rate your affinity towards sweating and perspiration?
- a. Moderate ☐
  - b. High ☐
  - c. Low ☐
- 20) How often you are prone to pimples and boils?
- a. Moderate ☐
  - b. High ☐
  - c. Low ☐

21) Appetite

- a. Erratic ☐
- b. Sharp hunger ☐
- c. Mild hunger ☐

22) Mental tendencies

- a. Questions, postulates ☐
- b. Judgement, artistic ☐
- c. Stable, logical ☐

23) Your financial management

- a. Spends quickly and unwisely ☐
- b. Moderately saves and accumulates ☐
- c. Saves a lot and accumulates ☐

24) What about your body weight?

- a. Low ☐
- b. Medium ☐
- c. Heavy ☐

25) What is the nature of your teeth?

- a. Large, protruding, crooked (more cavities) ☐
- b. Yellowish, moderate ( more discoloured) ☐
- c. White and large ☐

26) How is your bowel movement?

- a. Dry, hard stools, constipated, irregular and less in quantity ☐
- b. Soft, oily, loose stools, regular evacuation ☐
- c. Heavy, solid stools, regular evacuation ☐

27) How is your response when threatened?

- a. Lot of worrying, instability in reaction ☐
- b. Angry, easily provoked and highly irritable ☐
- c. Peaceful, slow, steady and balanced ☐

28) Sexual qualities

- a. Variable, strong desire, over indulgence and gets exhausted ☐
- b. Moderate with dominating behaviour ☐
- c. Usually low and steady desire with good stamina ☐

29) How do you feel after getting up from bed?

- a. Don't feel fresh ☐
- b. Feel well even with less sleep ☐
- c. Feel fresh but not good during decreased sleep ☐

30) What is the shape of your palms and feet?

- a. Long and Flat ☐
- b. Medium and slim ☐
- c. Short and broad ☐

**DEPARTMENT OF NOI NAADAL**  
**NATIONAL INSTITUTE OF SIDDHA, CHENNAI – 47**

**“EVALUATION AND STANDARDISATION OF UDAL ILAKKANAM  
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**FORM IV - INFORMED WRITTEN CONSENT FORM**

I .....exercising my free power of choice, hereby give my consent to be included as a subject in the diagnostic trial entitled “EVALUATION AND STANDARDISATION OF UDAL ILAKKANAM BASED ON SIDDHA CONCEPTS”. I may be asked to give urine and blood samples during the study.

I have been informed about the study to my satisfaction by the attending investigator about the purpose of this trial, the nature of study and the laboratory investigations. I also give my consent to publish my study results in scientific conferences and reputed scientific journals for the betterment of clinical research.

I am also aware of my right to opt out of the trial at any time during the course of the trial without having to give the reasons for doing so.

Signature /thumb impression of the patient:

Date :

Name of the patient:

Signature of the investigator:

Date :

Head of the Department:

**ஒப்புதல்படிவம்**  
**ஆய்வாளரால்சான்றளிக்கப்பட்டது**

நான் இந்த ஆய்வை குறித்த அனைத்து விபரங்களையும் நோயாளிக்கு புரியும் வகையில் எடுத்துரைத்தேன் என உறுதியளிக்கிறேன். இந்த ஆய்வின் போது எடுக்கப்படும் புகைப்படங்கள் மருத்துவ அரிவியலின் முன்னேற்றத்திற்காகமட்டும் பயன்படுத்தப்படும்.

இடம்:

கையொப்பம்:

தேதி:

பெயர்:

**நோயாளியின்ஒப்புதல்**

நான்\_\_\_\_\_என்னுடைய சுதந்திரமாக தேர்வு செய்யும் உரிமையைக் கொண்டு இங்கு தலைப்பிடப்பட்ட “சித்த மருத்துவத்தின் அடிப்படையாகக் கொண்டு உடல் இலக்கணத்தின் மதிப்பீடு மற்றும் தரநிலைப்படுத்தல்” என்றும் மருத்துவ ஆய்விடம் என்னை உட்படுத்த ஒப்புதல் அளிக்கிறேன்.

என்னிடம் இந்த மருத்துவ ஆய்வின் காரணத்தைப்பற்றி திருப்தி அளிக்கும் வகையில்ஆய்வு மருத்துவரால் விளக்கிக் கூறப்பட்டுள்ளது

இடம்:

கையொப்பம்:

தேதி:

பெயர்:



**DEPARTMENT OF NOI NAADAL**  
**NATIONAL INSTITUTE OF SIDDHA, CHENNAI – 47**

**“EVALUATION AND STANDARDISATION OF UDAL ILAKKANAM  
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**FORM IV- A - PATIENT INFORMATION SHEET**

**PURPOSE OF RESEARCH AND BENEFITS:**

The diagnostic research study in which your participation is proposed to assess a study on Udal Ilakkanam in patients visiting NIS OPD & IPD. Knowledge gained from this study would be of benefit to patients suffering from different ailments for the diagnosis and prognosis.

**STUDY PROCEDURE:**

You will be interviewed and examined as OP and IP patients at the study centre. At the first visit the physician will conduct a brief physical examination and assess Udalilakkanam with the help of questionnaire. After matching the inclusion criteria you will be included in this study.

**CONFIDENTIALITY:**

Your medical records will be treated with confidentiality and will be revealed only to other doctors / scientists. The results of this study may be published in a scientific journal, but you will not be identified by your name.

## **YOUR PARTICIPATION AND YOUR RIGHTS:**

Your participation in this study is voluntary and you may be withdrawn from this study anytime without having to give reasons for the same. You will be informed about the findings that occur during the study. If you do agree to take part in this study, your health record will need to be made available to the investigators. If you don't wish to participate at any stage, the level of care you receive will in no way be affected.

The Ethics committee cleared the study for undertaking at OPD and IPD, NIS. Any question arise with regards to this study you contact following person.

### **P.G student:**

Dr.KALANIDHI .D

Department of NoiNaadal

National Institute of Siddha

Chennai - 600 047.

9446530238

**ஆய்வின் நோக்கமும் பயனும்:**

தாங்கள் பங்கேற்கும் இவ்வாய்வு “சித்த மருத்துவத்தின் அடிப்படையாகக்கொண்டு உடல் இலக்கணத்தின் மதிப்பீடு மற்றும் தரநிலைப்படுத்தல்” சித்த மருத்துவ முறையில் நோயை கணிப்பதற்க்கான ஒர் ஆய்வு முறை. இவ்வாய்வு தாங்களின் நோய்கணிப்பை பற்றியும் நோயின் போக்கை பற்றியும் அறிய உதவும்.

**ஆய்வு முறை:**

தாங்கள் நேர்காணல் மற்றும் பரிசோதனைகளின் மூலம் உள்நோயாளி வெளிநோயாளி பிரிவில் ஆய்வு செய்யப்படுவீர்கள். முதல் நேர்காணலின் போது ஆய்வாளரால் உடல் பரிசோதனை செய்து குறிப்பிட்ட குறிகுணங்கள் இருப்பின் இவ்வய்விற்காக எடுத்துக்கொள்ளப்படுவீர்கள்.

**மந்தனம்:**

தங்களின் மருத்துவ ஆவணங்கள் அனைத்தும் மருத்துவர், ஆய்வாளர் அல்லாத பிறரிடம் தெரிவிக்கப்படமாட்டாது.

**நோயாளியின் பங்களிப்பும் உரிமைகளும்:**

இவ்வாய்வில் தங்களின் பங்கேற்பு தன்னிச்சையானது. இவ்வாய்வில் தாங்கள் ஒத்துழைக்க இயலவில்லையெனில் எப்பொழுது வேண்டுமானாலும் காரணம் எதுவும் கூறாமல் விலகிக்கொள்ளலாம். இவ்வாய்வின் போது அறியப்படும் தகவல்கள் தங்களுக்கு தெரிவிக்கப்படும். நோயாளியின் ஒப்புதலுக்குணங்க நோய்கணிப்பு விவரங்களை ஆய்வாளர் பயன்படுத்திக்கொள்வர். நோயாளி ஆய்வினிடைய ஒத்துழைக்க மறுத்தலும் எந்த நிலையிலும் நோயாளியை கவனிக்கும் விதம் பாதிக்கப்பட மாட்டாது. நிறுவன நெறிமுறை குழுமம்(Institutional Ethical Committee) மேற்கண்ட ஆய்வினை மேற்கொள்ள ஒப்புதல் அளித்துள்ளது.

ஆய்வு குறித்த சந்தகங்கள் இருப்பின் நம்பரை தொடர்பு கொள்ளவும்.

**மரு:கலாநிதி. டி**

**நோய் நாடல் துறை**

**தேசிய சித்தமருத்துவ நிறுவனம்**

**சென்னை-47, Ph :9446530238**



## NATIONAL INSTITUTE OF SIDDHA

राष्ट्रीय सिद्ध संस्थान -

Ministry of AYUSH - आयुष मंत्रालय

GOVERNMENT OF INDIA-भारत सरकार

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ईमेल: nischennaisiddha@yahoo.co.in

वेब : www.nischennai.org

F.No.NIS/6-20/Res/IEC/17-18


Date: 28-12-2017

### CERTIFICATE

Address of Ethics Committee: National Institute of Siddha, Tambaram Sanatorium, Chennai-600047, Tamil Nadu, India	
Principal Investigator: Dr.D.Kalanidhi, M.D(S) – II year, Department of Noi Naadal - Dissertation –	
Protocol title: Evaluation and standardisation of “UDAL ILAKKANAM” based on Siddha concepts.	
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Clinical trial Protocol (others – Specify)	Yes
Informed consent documents	Yes
Any other documents	-
Date of IEC approval & its number	NIS/13-IEC/2017-1-21/ 22-11-2017

We approve the trial to be conducted in its presented form.

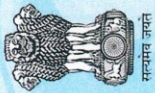
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Chairman

  
Member Secretary





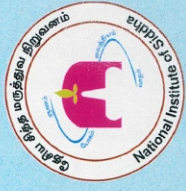


Ministry of AYUSH

# NATIONAL INSTITUTE OF SIDDHA

Ministry of AYUSH, Government of India

Tambaram Sanatorium, Chennai - 600 047.



CERTIFICATE

## WORKSHOP ON RESEARCH METHODOLOGY & BIOSTATISTICS

*This is to certify that*

Dr. .... **KALANIDHI.D** .....

*has participated in the above Workshop held from 16.04.2018 to 20.04.2018 conducted by the  
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248	Divya.S	25	F			18	5	7	VK	c	a	b	c	a	a	3	3	1	0	0	2	b	c	a	a	b	a	c	b	a	a	c	b	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a
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[illegible]



206	Mrs.Sumathi	70	F				8	11	11	PK	b	b	b	b	b	a	a	2	1	2	2	3	1	c	a	b	a	c	c	c	b	a	a	c	c	b	a	b	c	a	c			
207	Harsha,A.V	22	F				6	10	14	KP	a	c	c	c	c	b	3	1	2	1	1	2	a	c	b	b	c	b	b	c	b	c	b	c	a	a	a	c	c	b	b	c	b	
208	Ayush,V.A	25	M				9	12	9	PV	b	b	b	c	a	a	3	1	1	1	2	2	b	c	b	b	c	b	c	a	b	c	a	b	b	a	c	c	b	a	b	a		
Arunima																																												
209	Arunkumar	28	F				5	11	14	KP	b	c	a	c	b	b	2	1	2	1	2	3	b	c	b	a	b	c	a	b	c	a	c	c	b	c	b	a	c	c	b			
210	Mrs.Sheela Ajith	46	F				8	14	8	PV	a	a	a	c	b	b	2	3	3	1	1	3	b	c	c	b	b	c	a	a	a	b	a	b	b	a	c	c	b	b	b	b		
211	Mr.Ajikumar,V.K	52	M				5	14	11	PK	b	b	c	a	b	b	2	1	1	3	2	2	b	c	b	b	c	c	b	b	b	a	c	b	c	c	c	b	a	c	a	b	a	
212	Mrs.Shamini,P	20	F				10	17	3	PV	c	b	a	b	b	b	0	3	2	0	1	0	b	b	a	b	a	a	a	b	b	a	b	b	a	a	c	a	a	b	b	c		
213	Mrs.Retnamma	34	F				13	15	2	PV	a	b	b	a	b	a	3	0	0	0	3	3	b	a	a	b	b	a	b	b	a	a	a	a	b	a	c	c	b	a	b	b		
214	Mr. Shankar B	39	M				11	15	4	PV	a	a	a	a	b	b	3	0	2	0	0	1	b	a	b	b	a	b	a	c	b	a	c	c	b	b	a	b	b	a	b	b		
215	Mrs. K Kamala	45	F				7	15	8	PK	a	b	a	a	b	c	0	3	0	0	1	2	b	b	a	b	b	b	c	c	b	c	a	a	a	c	c	b	b	c	b	b	c	
216	Miss C Priya	25	F				17	7	6	VP	b	c	a	a	a	a	2	3	0	0	1	0	b	b	a	a	c	a	a	a	c	c	b	a	c	a	c	a	a	a	b	a	b	
217	Miss S Devika	28	F				10	16	4	PV	b	b	a	a	b	b	3	2	0	1	0	0	b	c	a	a	b	a	c	a	a	c	b	a	c	a	b	b	b	b	b	b	c	
218	Miss R Rajeswari	25	F				10	16	4	PV	a	b	a	a	a	a	c	0	3	2	0	0	1	b	c	a	a	b	a	c	a	a	b	b	b	c	a	b	b	b	b	b		
219	Miss T Sasipriya	25	F				9	13	8	PV	a	a	a	a	c	b	c	3	2	0	0	0	1	b	b	b	c	c	b	b	a	a	b	c	a	a	b	b	b	c	b	c	b	
Miss K																																												
220	Rajalakshmi	26	F				8	10	12	KP	a	b	a	a	b	c	3	2	3	1	1	1	b	c	c	a	b	c	b	c	b	a	a	c	c	b	c	b	c	b	a	b		
221	Miss M Nandhini	20	F				18	9	3	VP	c	a	a	a	a	a	0	3	0	0	0	1	b	b	a	a	a	a	b	a	a	b	a	a	b	a	a	a	a	a	b	a	c	b
222	Mrs.V.Sangeetha	29	F				11	14	5	PV	c	b	a	a	b	a	3	1	1	1	2	1	b	c	a	a	c	a	b	b	b	b	b	a	a	a	b	b	a	c	b	b	b	
Miss R Varsha																																												
223	Noble	25	F				14	11	5	VP	a	b	a	a	a	b	3	1	1	1	2	1	b	c	a	a	b	a	b	a	a	c	b	b	a	c	b	c	b	a	c	a	b	b
224	Mrs G Latha	38	F				6	11	13	KP	c	c	b	c	c	c	2	1	1	2	1	1	c	c	a	a	a	b	b	b	c	b	a	a	a	c	b	c	b	b	b	c	a	
225	Mrs K Visthra	27	F				12	10	8	VP	c	c	b	c	b	a	2	2	1	1	1	1	a	b	a	a	a	a	c	a	c	b	b	a	a	a	c	c	b	b	c	a	b	b
Mrs																																												
226	Bhagyalakshmi T R	52	F				7	12	11	PK	c	c	c	c	b	b	3	0	0	0	0	0	b	a	b	a	c	b	b	a	b	b	c	c	a	c	c	c	b	c	b	a	b	a
227	Miss S Keerthika	24	F				12	13	5	PV	b	b	a	a	a	a	3	2	1	2	2	2	b	b	a	a	b	b	b	a	a	b	b	c	c	c	c	a	b	b	a	a	b	b
228	Miss S Aparna	25	F				10	14	6	PV	a	b	a	a	a	c	c	2	1	2	1	1	3	a	b	a	b	b	a	b	a	b	b	a	b	b	a	a	c	b	c	b	b	c
229	Mr.Jaison	27	M				8	10	12	KP	a	c	c	b	c	b	3	2	2	1	1	3	b	b	c	a	b	a	b	a	b	a	c	a	b	a	a	b	c	b	c	c	c	c

181	Anjalikrishna.M.R	24	F				11	12	7	PV	a	b	a	c	b	b	2	3	2	3	1	1	b	c	a	b	b	a	b	a	a	c	b	a	b	c	b	b	c				
182	Anupama.S	24	F				12	14	4	PV	b	b	c	b	b	b	2	1	1	1	1	2	b	a	a	b	c	b	b	a	b	a	a	a	c	a	a	b	a				
183	Mr.Kanthakumar	32	M				10	14	6	PV	b	c	c	a	b	b	3	2	1	2	2	2	c	b	a	a	b	b	a	a	b	c	a	c	b	a	b	a					
184	Mr.Abhijith P Shibu	25	F				5	12	13	KP	b	c	a	a	b	b	3	2	1	1	1	1	c	c	c	b	b	b	c	b	b	b	a	a	b	c	c	a					
185	Mr.Rahul.M	23	M				7	14	9	PK	a	a	c	b	b	b	1	2	1	1	1	3	b	c	c	b	b	b	b	c	a	b	c	b	a	a	c	b	a				
186	Mr.Abhijith.A.A	24	M				8	16	6	PV	b	c	a	b	b	b	2	3	2	3	1	2	b	b	c	a	b	b	b	b	a	b	b	a	a	b	c	b	a				
187	Mr.Sreeraj.M.S	27	M				11	17	2	PV	a	b	a	b	a	b	0	0	2	0	0	0	b	b	b	b	a	b	b	a	b	a	b	a	c	b	a	a	b				
188	Mr.Ommer Farooq	29	M				10	14	6	PV	c	a	b	c	a	b	2	1	3	2	2	1	b	b	c	b	b	c	b	a	a	b	c	a	b	b	b	a	a				
189	Mr.T.Mohanan Nair	59	M				15	10	5	VP	b	c	a	b	b	b	3	2	2	2	0	0	c	a	a	b	a	c	a	a	b	a	a	a	c	b	a	b	a				
190	Dr.M.Natarajan	31	M				11	12	7	PV	b	c	a	c	b	b	3	2	1	1	1	1	b	c	a	b	a	c	c	a	b	b	c	a	a	a	b	a	a				
191	Mr.Arshad Ali.A	25	M				14	9	7	VP	a	c	a	a	a	b	2	2	2	2	0	0	a	b	c	b	b	a	c	a	a	b	a	a	a	c	a	c	b	c	b		
192	Aparna Dhanapal	25	M				15	9	6	VP	a	c	a	a	a	b	c	1	3	3	3	2	1	a	c	c	b	b	a	a	a	a	b	a	a	c	b	a	c	b	b		
193	Anusha T.P	24	F				9	17	4	PV	c	b	c	b	c	b	a	b	0	2	2	0	0	2	b	b	a	a	b	b	c	b	b	b	a	a	b	a	b	b			
194	Vinitha Rani K.J	38	M				12	13	5	PV	c	c	c	c	b	b	3	2	2	0	0	2	b	b	a	a	b	a	a	b	a	a	c	a	b	a	b	c	a	b			
195	Mrs.Sujatha	58	F				8	13	9	PK	a	b	c	b	b	a	3	2	2	1	2	3	c	a	b	b	c	a	c	c	c	a	b	c	b	b	a	b	c	b	a	b	
196	Mrs.Sakkeena	35	F				8	15	7	PV	b	b	s	b	a	b	3	2	1	1	1	1	c	c	c	a	b	c	b	c	a	b	b	a	b	c	a	b	b	b			
197	Anagha Vijay	20	F				14	10	6	VP	b	c	c	a	a	a	3	1	1	1	2	3	c	c	b	a	c	b	c	a	a	c	a	a	c	c	b	b	a	b	a		
198	Mrs.Bindhu.S	53	F				9	13	8	PV	b	b	a	b	b	b	2	1	1	1	2	2	b	b	c	b	b	b	a	b	a	a	c	c	a	a	c	b	c	c	b	b	
199	Mr.Harisenkar.M.D	20	M				8	11	11	KP	b	b	c	a	b	b	3	2	1	1	1	2	c	c	b	b	c	b	c	a	a	c	b	c	b	c	b	a	b	c	a	a	
200	Mr.Anilkumar.V.K	60	M				5	19	6	PK	a	c	a	b	b	c	3	1	3	3	1	2	c	c	b	b	b	b	c	b	b	a	b	b	b	c	b	b	b	b			
201	Mr.Atunkumar.V.K	48	M				13	12	5	VP	a	a	a	b	a	c	2	3	2	1	1	3	b	c	a	b	c	a	a	a	a	c	a	b	b	c	c	a	b	b			
202	Mrs.Sreeja P.S	42	F				12	8	10	VK	a	c	a	a	b	a	2	2	1	2	1	3	c	c	b	b	c	c	a	a	b	b	a	b	a	b	c	c	a	a	b	c	
203	Varsha.A.V	20	F				6	10	14	KP	a	b	b	a	a	a	3	1	2	1	1	2	a	c	b	b	c	b	b	c	b	c	c	c	c	c	c	b	c	c	b	c	
204	Bhaghya.V.A	21	F				8	12	10	PK	a	b	b	a	a	a	3	1	2	1	1	2	a	c	b	b	c	b	c	b	c	c	c	c	c	c	b	a	b	b	b		
	Mr.Anandkumar.V						4	12	14	KP	a	b	c	a	b	b	3	2	1	2	3	3	c	c	b	b	c	c	c	b	b	c	a	b	c	c	c	b	c	a	b	c	b
205	.K	51	M																																								

152	G.Bharathi	25	F				6	4	14	KV	c	a	c	c	c	c	3	3	3	1	2	2	b	b	c	c	c	b	b	b	b	b	b	c	b	a	a	c	c	b	b	c	a	a	c	c
153	V.Mahalakshmi	25	F				10	14	6	PV	b	c	a	c	a	c	2	3	2	1	2	1	b	b	a	b	b	a	b	a	b	a	b	c	b	b	a	b	a	b	a	a	c	b		
154	R.Sindhu	25	F				9	12	9	PV	b	b	a	b	b	a	2	1	2	1	1	1	b	b	a	b	b	a	b	a	a	b	c	b	c	b	a	b	a	b	b	c	a	c	c	
155	R.Elakya	24	F				13	10	7	VP	c	c	a	c	a	b	3	3	2	1	2	2	a	c	b	a	b	a	a	a	c	b	a	b	a	c	c	b	b	a	b	a	a	b		
156	R.Ammannuthu	23	F				10	12	8	PV	a	a	a	a	c	c	3	1	1	2	2	1	b	b	a	b	b	b	c	b	a	c	b	a	c	a	b	c	b	a	c	b	b	b		
157	K.Petchiammal	24	F				14	10	6	VP	a	b	a	a	c	b	3	1	1	2	2	1	a	b	a	a	b	a	b	a	b	c	a	a	a	c	b	a	a	c	b	b	c	c		
158	R.Sathyapriya	24	F				11	8	11	VK	a	a	a	c	c	b	3	2	2	2	1	2	c	b	c	c	b	a	a	a	a	c	c	a	a	a	b	b	b	c	c	c	b	b		
159	G.Yogalakshmi	24	F				9	9	12	KP	a	c	a	a	c	c	3	3	1	2	2	3	b	b	a	b	b	a	b	a	b	c	c	a	a	c	b	c	b	c	c	c	c			
160	S.Neskeeth	23	F				12	12	6	VP	b	c	a	c	a	b	a	1	2	1	2	1	3	a	c	a	a	b	a	b	b	c	a	c	b	a	b	b	c	a	b	a	a	c	a	
161	G.Kavitha	23	F				7	18	5	PV	a	c	a	b	b	b	3	2	2	1	2	2	b	c	b	b	b	b	b	b	c	b	a	a	a	b	c	b	b	b	a	c	b			
162	C.Kalaiarasi	23	F				8	15	7	PV	b	c	a	c	a	c	3	1	1	1	1	3	b	c	a	a	b	a	b	b	a	b	b	b	a	b	b	b	b	c	b	a	c	b		
163	D.Jelin Kethizyal	23	F				10	12	8	PV	b	b	a	b	a	b	2	2	1	1	1	1	b	c	a	b	b	a	b	a	a	b	b	a	a	c	c	c	b	b	b	c	a	c	b	
164	M.Adila	25	F				6	14	10	PK	b	b	b	a	a	a	3	2	2	1	1	1	b	b	c	b	c	b	b	c	c	b	b	b	b	c	c	b	a	c	a	a	c	b		
165	A.Bhinda	23	F				9	15	6	PV	b	c	a	c	a	c	3	1	1	1	1	3	b	c	a	a	b	a	b	b	a	b	b	b	a	b	a	b	b	b	c	b	a	c	b	
166	C.Rahini	25	F				12	13	5	PV	a	b	a	c	a	b	2	2	2	2	1	3	b	a	a	b	b	a	b	b	c	a	c	a	a	b	a	a	b	a	a	b	c	b		
167	D.Sudheendhiran	30	M				5	6	19	KP	a	c	c	c	b	b	3	2	0	1	0	1	c	c	c	c	c	c	b	c	c	c	a	a	b	c	c	c	b	c	c	c	a			
168	Mrs.Jayasree	58	F				4	15	11	PK	b	b	c	c	b	b	3	2	2	3	1	2	b	b	b	b	c	c	c	c	a	b	c	c	c	b	b	b	b	a	a	c	b			
169	E.Bavithra	24	F				8	17	5	PV	a	b	a	b	a	b	3	3	2	1	1	1	b	b	b	b	b	b	a	b	c	a	a	a	c	c	b	b	b	b	b	c	c			
170	A.Senthamizhmani	24	F				9	13	8	PV	a	a	a	a	b	b	1	1	1	2	1	3	c	a	b	a	b	a	c	b	b	b	c	a	c	b	c	b	c	b	a	c	b			
171	S.Sathiyavani	23	F				9	19	2	PV	a	b	a	b	a	b	3	3	2	1	1	1	b	b	b	a	b	b	b	b	a	a	a	a	c	b	a	c	b	b	b	b	b			
172	V.K.Devi	23	F				10	16	4	PV	b	c	a	a	b	b	2	0	0	0	0	0	b	b	a	a	b	c	b	a	b	b	a	a	a	c	c	b	b	b	b	b	a	b		
173	P.Sivaranjini	25	F				6	20	4	PV	b	b	a	c	b	a	0	2	0	0	0	0	b	b	b	b	c	a	b	b	a	b	b	b	b	b	b	b	b	a	a	c	c			
174	S.Vasanthia	26	F				5	22	3	PV	b	b	a	b	b	b	3	2	0	0	0	1	b	b	b	b	b	a	b	b	c	b	b	a	c	b	b	b	b	a	b	c	b			
175	Mr.P.K.Divakaran	67	M				3	16	11	PK	b	b	b	b	b	b	3	1	3	3	1	2	c	b	a	a	c	c	b	c	c	b	c	c	b	c	c	b	b	c	b	a	b			
176	Arudevi V	23	F				10	5	15	KV	a	a	c	a	c	c	3	0	0	2	0	3	c	a	c	c	b	b	c	c	a	b	c	a	b	c	a	b	c	a	b	a	a			
177	Mrs.Amitha	34	F				7	15	8	PK	b	c	a	a	a	b	1	2	2	2	1	2	c	c	a	b	b	b	a	a	b	b	a	c	c	c	b	b	b	b	b	b	b			
178	Mr.Varun	30	M				11	9	10	VK	c	c	a	c	b	a	3	1	2	1	2	1	b	b	c	a	b	a	c	a	a	b	a	c	a	c	b	c	a	b	b	a	c	b		
179	Mr.Venugopalan	56	M				2	18	10	PK	b	b	c	b	b	b	3	2	1	0	0	0	c	b	b	b	a	b	b	b	c	b	b	b	c	c	b	b	c	b	c	c	c			
180	Adithya .S.R	23	F				10	16	4	PV	b	b	a	b	b	a	2	3	2	1	1	3	a	b	a	b	c	a	b	b	a	a	a	c	b	a	b	a	b	a	a	b	b			

[illegible]

[illegible]

97	Mrs.B.Pushparani	51	F	K81873	Madhumegam Vallazhaikelveay	5	23	2	PV	b	b	b	b	b	b	b	3	1	0	0	0	0	c	b	b	b	a	b	b	c	b	b	c	c	b	b	b	b	b	b	b		
98	Mr.K.Venkattamani	59	M	K70288	u	14	9	7	VP	a	b	b	b	a	a	3	0	0	0	0	0	c	c	a	a	c	c	a	b	b	b	c	c	b	a	a	a	a	a	b			
99	Mrs.Selvi.T	45	F	K34978	Thandagavatham	10	8	12	KV	a	c	a	a	c	c	3	0	1	0	0	0	a	a	c	b	a	a	c	b	c	b	b	b	c	b	a	c	c	a	c	b		
100	Mrs.Geetha.V	39	F	L17694	Madhumegam/Thandagavatham/Gumnam	3	13	14	KP	c	c	c	c	c	c	3	0	0	0	0	0	c	c	c	b	c	b	b	c	b	b	c	b	c	c	b	a	b	c	a	a	b	
101	Miss.Aparna.V	22	F	L14334	Azhaikeelvayu	6	12	12	PV	b	c	a	a	b	b	0	0	0	0	1	3	b	c	b	b	c	c	a	c	b	b	c	c	c	b	a	b	b	c	c	a	c	
102	Mr.Kannikumar.G	39	M	J89899	Eraippu	5	14	11	PK	a	c	a	c	c	3	0	0	1	0	0	a	b	b	b	c	c	b	b	c	c	c	c	c	a	b	c	b	a	b	a			
103	Mr.Sugumar.A	30	M	L16184	Moolam	5	10	15	KP	a	c	a	b	b	0	0	0	1	0	3	c	a	c	b	b	b	c	b	b	c	c	b	c	b	c	b	c	a	c	a	a		
104	Mrs.Lalitha.S	49	F	K77663	Azhaikeelvay/Kasam	13	12	5	VP	a	b	a	a	b	b	1	0	0	0	0	3	a	a	a	a	c	a	c	b	a	b	c	c	c	b	a	b	b	c	a	b	c	
105	Mrs.P.Pushparani	49	F	E72274	Vallazhaikelveayu	15	10	4	VP	a	a	a	a	a	a	3	0	0	0	0	0	a	a	a	b	a	0	a	b	b	c	b	b	c	c	a	b	a	a	b	b		
106	Mr.Kumar.A	48	M	L19044	Madhumegam/Keelvayu	1	19	9	PK	b	b	b	b	b	b	3	0	0	0	0	0	b	a	b	b	b	0	c	b	b	c	c	c	b	c	b	b	c	c	b	b		
107	Mrs.P.Shantha	63	F	H95125	Eraippu	5	13	12	PK	b	b	b	c	c	b	0	0	0	1	0	3	c	a	a	b	c	c	b	b	c	a	c	c	c	b	c	b	c	a	a	c	b	b
108	Mr.Dhanapal.S	60	M	I44375	Kalladaippu/Azhaikeelvayu	6	6	16	KP	a	c	a	c	c	c	3	1	0	0	0	0	a	a	b	b	c	c	a	c	b	c	c	c	c	c	c	b	c	c	c	b	a	
109	Mr.Vadivel.B	70	M	J13066	Povthiram/Madhumegam/Kumbavatham	7	14	8	PK	a	b	a	a	b	b	1	0	0	3	0	0	c	a	a	a	c	0	b	c	b	c	b	b	c	c	b	a	b	b	b	c	b	b
110	Mr.Parthasarathi.G	62	M	K46718	Azhaikeelvayu	16	12	2	VP	b	b	b	b	a	b	3	0	0	0	0	0	c	a	a	a	a	a	a	b	b	a	a	b	c	c	b	a	a	b	b	a	a	c
111	Mrs.C.Paivala	61	F	L12963	Kuthikalvatham	5	15	10	PK	b	b	b	a	b	b	3	0	0	1	0	0	c	a	b	a	b	a	b	b	c	c	a	c	c	c	b	c	c	b	c	b	b	
112	Mr.A.K.Chandrasekar	64	M	J59651	PeenisuvGunnam	11	15	4	PV	a	b	b	b	b	b	3	0	0	1	0	0	a	b	b	b	b	a	a	a	a	b	b	c	c	c	a	a	a	b	a	c	b	c
113	Mrs.Padnavathy.M	65	F	J23317	Kalanjagapada/Thandagavatham	8	16	6	PV	a	b	b	b	b	b	1	0	0	0	0	3	b	a	b	b	b	b	a	a	b	b	c	b	c	c	c	c	b	b	b	a	a	c
114	Mrs.Jayanthi.B	32	F		Elaippu/Keelvayu	19	8	3	VP	b	a	a	a	a	b	1	3	0	0	0	0	a	c	a	a	a	a	a	b	a	b	c	c	c	a	a	a	a	a	a	b		
115	Mrs.D.Amutha	50	F	L07052	Keelvayu	7	12	11	PK	b	c	a	b	c	b	3	1	0	0	0	0	c	b	a	c	b	c	c	b	b	a	c	c	b	c	c	b	c	c	b	c	b	b

82	Mrs.R.Gomathi	35	F	J68883	Kumbavatham/Azhaleekavayau	3	13	14	KP	c	c	c	c	b	b	1	0	0	0	0	0	3	c	c	b	c	c	c	b	b	c	c	b	b	c	a	b	c	a	b	b	c	b	a	b	b
83	Mr.P.Kumar	50	M	L16114	Moolam/Seriyamalai	5	21	4	PV	a	b	a	b	b	b	0	0	0	1	0	3	b	b	b	b	a	b	c	b	b	c	c	a	b	b	b	a	b	b	b	b	b	b	b	b	
84	Mr.P.Angamuthu	45	F	L07701	Pakkavatham(Rt)/Kuruthiazhal/	5	12	13	KP	a	c	a	b	b	b	1	0	0	0	0	3	c	a	a	b	c	c	c	b	c	b	b	c	c	c	a	b	b	c	b	b	b	b	b		
85	Mrs.M.Deviprabha	57	F	I84437	Azhaleekavayau/Ovvamai	1	5	24	KP	c	c	c	c	c	c	3	1	0	0	0	0	c	c	c	b	c	c	c	b	c	c	c	b	c	c	b	c	a	b	c	c	b	a	a		
86	Mr.M.Gothandan	56	M	K98422	Madhumegam	0	28	2	PK	b	b	b	b	b	b	0	0	0	1	0	3	b	b	b	b	b	b	b	b	b	b	b	c	b	b	b	b	b	b	b	b	b	b	b		
87	Mr.D.Ravikumar	39	M	J79604	Madhumegam	3	20	7	PK	c	c	b	b	b	b	3	0	0	0	0	0	c	a	b	b	b	c	c	b	b	b	b	c	b	a	b	b	b	b	b	b	b	b	b		
88	Mr.D.Durai	35	M	L16700	Thaithunatham	3	18	7	PK	b	c	c	b	b	b	3	0	0	0	0	0	c	b	b	b	b	b	c	b	c	b	c	c	c	a	b	b	a	a	b	a	b	b	b		
89	Mr.Balasubramanyan.K	47	M	L12314	Nadukkuvatham	6	7	17	KP	c	c	c	c	b	b	3	1	0	0	0	0	c	a	b	c	c	b	c	c	c	c	c	c	a	b	b	b	b	b	b	b	b	a	a		
90	Mr.M.Rangarajan	69	M	K96385	Puroshakola Veekam/Ovvamai	6	18	6	PK	b	b	b	b	a	b	3	0	0	1	0	0	c	b	a	b	a	b	b	c	b	b	c	b	b	c	b	b	a	c	b	a	c	b	b		
91	Mrs.S.Ponnamm	60	F	K03998	Thandagavatham/Eraippu	6	5	19	KV	c	c	c	c	c	c	0	0	0	1	0	3	a	a	c	b	c	c	b	c	c	c	c	c	c	b	c	c	b	a	c	a	a	b	b		
92	Mr.A.Akbar Basha	67	M	K92855	Madhumegam/Kuruthiazhal/Azhaleekavayau	2	12	16	KP	c	b	c	c	b	c	3	0	0	0	0	0	c	c	b	c	c	a	c	c	b	b	c	c	c	b	c	b	b	c	c	b	a	b	b		
93	Mrs.P.Ambigaleela vathy	70	F	H68465	Ovvamai/Kuruthiazhal/Thandagavatham	22	3	5	VK	a	a	a	b	a	a	3	0	0	0	0	0	a	a	a	a	a	a	a	a	c	c	a	c	a	a	b	a	a	c	a	b	c	b	c		
94	Mrs.Rani.S	66	F	H47372	Venpuli/Madhumegan/Keelavayau	16	11	3	VP	a	b	b	b	b	b	1	0	0	0	0	3	a	a	a	a	a	a	a	b	a	a	b	c	c	c	a	b	a	b	a	a	a	c	c		
95	Mrs.C.sowbakkiya m	60	F	K50826	Kuruthiazhal/Thandagavatham	1	7	22	KP	b	c	b	b	c	c	3	0	0	0	0	0	c	c	c	b	c	c	c	b	c	b	c	c	c	b	c	c	c	c	c	c	b	a	b	a	
96	Mr.D.Shanmuganathan	59	M	L29405	Madhumegam/Moolam	1	11	19	KP	c	c	c	c	b	b	3	0	0	1	0	0	c	c	b	b	c	c	c	c	b	b	c	c	c	b	c	c	b	c	c	b	a	c	b	a	



[illegible]



52	Mrs.Rejani	40	F		Eraippu	10	8	12	KV	a	b	b	a	b	b	1	0	0	0	0	0	3	c	b	b	b	a	a	c	b	c	c	c	b	a	b	a	b	b	b	b
53	Mr.Baskaran	67	M	H99144	Thandagavatham [Velippu	7	17	6	PV	b	b	b	a	c	b	1	0	0	0	0	3	c	b	b	a	c	b	b	b	b	b	b	c	b	a	a	b	b	a	b	
54	Mrs.P.Thenmozhi	60	F	J39845	Azhalkkeevayal/K uraiveethana No//ladnumega m	4	20	6	PK	a	c	a	c	c	b	1	0	0	0	0	3	c	a	a	b	a	a	a	c	b	a	c	c	c	c	b	a	c	b	b	b
55	Mrs.Dhanalakshmi	51	F	I79896	Azhalkkeevayal/M adnumegam	9	10	11	KP	a	b	b	b	b	b	1	0	0	0	0	3	c	a	a	b	c	c	a	c	c	c	c	c	b	a	b	b	a	b	a	b
56	Mr.Periannan	61	M	L08370	Veekam	6	12	12	KP	a	c	a	c	b	b	1	0	0	0	0	3	c	b	a	b	c	b	a	c	b	c	b	b	c	b	a	b	b	a	b	b
57	Mrs.Tamilsevi.S	33	F	K52430	Kumbavatham/K assam	6	15	9	PK	b	c	b	c	b	c	0	1	0	0	0	3	c	c	c	c	c	c	a	c	c	c	c	c	b	c	c	b	c	c	b	b
58	Mrs.Kalarasi.S	51	F	I87856	Kuraiveethana No//ladnumega m/Kkeevayal	4	6	20	KP	a	c	a	b	b	b	3	1	0	0	0	0	c	c	b	b	b	a	c	c	b	c	b	c	c	b	c	c	b	c	b	
59	Mr.Karunanidhi	65	M	L11286	Nuraieeral Putru	3	12	15	KP	c	b	b	b	b	b	1	0	0	0	0	3	b	b	a	b	c	b	c	b	b	b	b	c	c	a	b	a	b	b	c	b
					Maarpu Putru/Moolam/M adnumegam																																				
60	Mrs.Kalanidhi.A	62	F	K82508		3	21	6	PK	a	b	b	b	b	b	0	2	0	0	0	3	b	a	a	b	c	a	b	c	c	c	b	c	c	b	b	b	c	c	b	b
61	Mrs.L.Lalitha	60	F	K81072	Malakkudal Putru	4	16	10	PK	a	a	a	a	a	a	3	0	0	0	0	1	c	c	a	a	a	a	c	c	b	c	c	b	b	a	b	b	a	b	c	
62	Mr.Parasuraman.R	60	M	K81511	Kalladaippu/Vayir u Putru	14	7	9	VK	a	b	b	b	b	b	0	0	0	0	3	c	b	a	b	b	b	b	c	b	c	b	c	c	b	a	b	b	c	c	b	b
63	Mr.Balasubramany an.V.A	67	M	J81845	Nuraieeral Putru Avartha No//Azhalkkeevay u	3	17	10	PK	b	b	b	b	b	b	3	1	0	0	0	0	c	a	b	b	a	a	a	c	b	c	b	c	c	b	c	a	b	a	b	b
64	Mr.N.Mohan	59	M	L10846		7	16	7	PV	a	c	c	b	b	b	3	0	0	0	0	0	b	a	a	a	c	b	b	c	b	c	b	b	c	b	a	b	a	b	b	b
65	Mr.V.Palani	49	M	G34160	Thandagavatham	9	15	6	PV	a	c	c	b	b	b	1	0	0	0	0	3	b	a	a	a	c	b	c	b	b	b	b	c	c	b	a	b	b	a	b	a
66	Mrs.Devi.A	36	F	K69038	Kalanjaganadai	4	17	11	PV	c	c	c	c	c	b	0	3	0	1	0	0	b	a	c	b	b	a	c	c	b	a	b	b	a	b	b	b	b	b	c	

36	Mrs.Savithra	25	F		Pithappaikal	7	19	4	PV	a	c	a	b	b	0	3	0	0	0	1	b	b	b	b	a	a	b	b	a	a	b	b	a	a	b	c				
37	Mrs.Usha M	63	F	J/9536	Kuthikaalvatham/ Madhumegam/K aalani	5	9	16	KP	c	c	b	b	b	3	0	0	0	0	1	c	a	c	c	c	c	c	b	c	c	a	a	c	b	c	c	b			
38	Mrs.Pattammal K	68	F	G71990	Azhakeekayau	6	10	12	KP	b	b	b	b	b	1	0	0	0	3	c	a	c	c	c	c	c	c	c	c	b	c	b	b	a	a	c	a	c		
39	Mrs.Kalavathi J	62	F	I42584	Azhakeekayau	7	12	11	PK	c	c	c	b	b	1	0	0	0	3	a	b	b	c	a	c	b	a	c	c	c	a	b	b	a	a	c	b	b		
40	Mrs.Uma E	60	F	J56975	Azhakeekayau	6	20	4	PV	a	b	b	b	b	0	1	0	3	0	0	b	b	b	a	a	b	b	c	c	b	c	b	b	b	a	b	b	b		
41	Mr.S.Sampoornam	60	F	K30509	Kuthikaalvatham/ Madhumegam/K uruthazhal	19	9	2	VP+A	b	a	c	b	b	3	0	1	2	0	0	a	a	b	a	a	a	c	b	c	c	b	c	a	a	c	b	a	c	a	c
42	Mr.P.Murugesan	66	M	L10507	Azhakeekayau	3	20	8	PK	a	c	b	b	b	3	0	0	1	0	0	c	a	b	b	c	b	b	b	c	b	c	b	b	b	b	c	b	b	b	
43	Mrs.vijaya murugesan M	65	F	L04562	Karappan	5	19	6	PK	b	b	a	a	b	3	1	0	0	0	2	c	b	b	c	b	c	a	c	b	b	c	b	b	b	a	c	b	b	c	
44	Mr.Kuppusamy C.	63	M	I52086	Thandagavatham	12	9	9	VP	c	b	b	b	a	0	0	0	1	0	3	a	c	c	a	a	a	c	b	c	c	a	a	b	a	b	a	a	b	b	
45	Mrs.N.Malliga	61	F	L12930	Azhakeekayau/K uruthazhal/Madh umegam	5	13	7	PK	c	b	b	b	b	1	0	0	0	0	3	b	b	b	b	b	c	a	b	c	c	c	c	b	b	a	a	a	b	b	
46	Mr.N.G.Krishnan	70	M	H11620	Azhakeekayau	8	14	8	PV	a	b	a	a	b	1	0	0	0	3	b	b	b	a	b	c	b	c	c	c	c	c	b	b	a	a	a	b	c		
47	Mrs.S.Baby	67	F	G60745	Gunnamm/Azhak keekayau	10	14	6	PV	a	b	b	b	b	3	0	0	1	0	0	b	b	b	b	a	c	b	a	b	c	c	a	a	a	b	c	a	a	b	
48	Mr S.Thandavamo orithy	52	M	I42094	Thandagavatham	8	20	2	PV	a	a	a	b	b	1	0	0	3	0	0	b	b	a	b	a	b	c	b	a	b	b	c	a	b	b	b	b	b		
49	Mrs.R.Thilagavathy	43	F	I64475	Moolam	8	21	2	PV	b	b	a	b	b	1	0	0	0	0	3	b	a	b	b	a	b	b	a	b	b	c	b	a	a	b	b	b	b		
50	Mrs.S.Meena	56	F	HH3066	Kuthikaalvatham/ Madhumegam/K umbavatham	11	13	6	PV	a	b	a	b	b	1	3	0	0	0	0	b	a	a	b	a	a	a	c	a	c	c	a	b	b	a	b	a	b	b	
51	Mr.A.Rajendran	68	M	K54152	Azhakeekayau/M adhumegam/Kes am	7	15	8	PK	b	b	b	b	b	3	0	0	0	1	0	c	a	b	a	b	b	a	c	c	b	c	c	b	a	b	a	a	b	c	

18	Mrs. V. Shanthi	54	F	I79665	Powthiram/Kuruth iazhal	4	14	12	PK	c	c	b	b	c	b	1	0	0	2	0	3	c	a	c	b	a	c	c	c	b	c	c	a	a	b	b	b	b	b	b		
19	Mrs. R. Dhanalaksh mi	46	F	L11644	Azhalkeelvay u/MI M	6	21	3	PV	b	b	b	b	b	b	1	0	0	0	0	3	a	b	b	b	a	b	a	a	b	b	c	c	c	b	a	b	b	c	b	c	
20	Mrs.Sivarajini s	27	F	L11678	Peenisam	5	11	14	KP	b	b	a	b	a	b	1	0	0	0	0	3	a	c	b	c	b	a	c	c	b	c	c	c	b	c	b	c	c	a	c	b	
21	Mt. V. Selvakumar	35	M	L11747	Peenisam/MM	4	24	2	PV	a	b	b	b	b	b	3	0	1	0	0	0	b	b	b	b	b	c	a	c	b	a	a	b	b	b	b	b	b	b	b		
22	Mrs.S. Jayanthibai	42	F	K50205	Kalanjagapada/IK eelvayu	8	21	1	PV	b	b	b	b	b	b	1	3	0	0	0	0	b	a	b	b	b	a	a	b	b	c	a	c	b	a	b	b	b	a	b		
23	Mt.L.Gnanasamma ndham	65	M	L07735	Azhalkeelvayu	5	11	14	KP	b	b	b	b	b	b	3	0	2	0	0	0	b	a	c	a	c	c	b	c	b	a	c	c	c	b	b	b	c	a	c	a	
24	Mt.M.Akilan	53	M	J74973	Keelvayu	9	15	6	PV	a	b	b	b	b	a	0	1	0	0	0	3	a	b	b	b	b	a	a	b	b	c	c	c	b	b	a	a	b	c	b	a	
25	Mt. R. Govindharaj	64	M	J65275	Pakkavatham(Rt) /kuruthiazhal/Ma dhumegam	4	8	18	KP	c	c	c	b	b	b	1	0	0	3	0	0	c	a	c	c	c	c	b	c	b	a	c	c	b	c	a	b	c	c	c	a	
26	Mrs.E. Sarala	42	F	K93803	Keelvayu	4	12	14	KP	a	c	a	b	b	b	3	1	0	0	0	0	c	a	c	b	b	c	c	c	b	c	c	b	c	b	b	b	b	c	c	b	
27	Mrs. T. Savithri	51	F	K97739	Keelvayu	5	3	22	KV	a	b	c	c	c	c	1	0	0	0	0	3	c	a	c	a	c	c	c	b	c	c	c	c	c	c	b	c	c	c	a	b	
28	Mrs. Y. Glory	54	F	G96385	Kumbavatham/MI adhume gam/Kur uthiazhal	1	9	20	KP	c	c	a	c	b	b	1	2	0	0	0	3	c	c	c	c	c	c	b	c	b	b	c	b	c	c	c	c	c	b	c	b	
29	Mt. T. Ashokkumar	40	M	H47024	Madhume gam/IK uthikaalvatham	4	20	6	PK	a	b	b	b	b	b	0	0	0	2	1	3	a	b	b	b	c	b	b	c	b	b	c	b	a	a	b	b	b	c	b	b	
30	Mt. J. Ramamirtham	55	M	J3507	Madhume gam	10	13	7	KP	c	c	b	c	b	b	0	3	0	1	0	0	c	c	c	b	c	b	b	c	b	c	c	c	b	c	b	b	c	c	b	a	
31	Mt. G. Ulaganathan	68	M	K65618	Madhume gam/IK eelvayu/Rudra ro gam	1	16	13	PK	b	b	b	b	b	b	3	0	0	1	0	0	c	a	b	c	b	b	c	c	c	c	c	c	c	b	b	b	b	c	b	b	
32	Mt. T. Victoria	52	F	K69866	Keelvayu	5	18	7	PK	a	b	b	b	b	b	3	2	0	0	0	0	b	b	b	a	b	b	c	b	c	c	c	b	c	a	a	b	b	c	b	c	
33	Mt. Abdul Lathif s	48	M	K90323	Azhalkeelvayu	1	21	8	PK	c	c	c	c	b	b	3	0	0	0	1	0	c	b	c	c	c	b	c	c	c	b	c	b	c	c	b	b	c	c	c	a	
34	Mt.M. Sigamani	64	M	L07512	Azhalkeelvayu	8	12	4	PV	a	b	a	b	a	b	2	0	1	0	0	3	c	b	a	c	c	a	c	b	a	b	b	b	a	b	b	b	b	b	b	b	
35	Mrs. R. Banu	38	F	L12666	Thandagavatham	10	15	5	PV	b	b	a	b	b	b	3	0	0	0	0	1	b	b	b	b	b	b	b	c	a	a	a	a	c	b	a	b	b	a	a	c	c

Sl. No.	Name	Age	Sex	OP No.	Diagnosis	Vatham	Pitham	Kapham	Thegam	Q1	Q2	Q3	Q4	Q5	Q6	Q7 A (Sweet)	Q7 B (Sour)	Q7 C (Salt)	Q7 D (Bitter)	Q7 E	Q7 F (Pungent)	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18	Q19	Q20	Q21	Q22	Q23	Q24	Q25	Q26	Q27	Q28	Q29	Q30	
1	Mr.J.Aravind	26	M	K68890	Thandagavatham	13	7	10	VK	a	c	a	b	b	b	3	0	0	1	0	2	a	b	c	b	b	a	a	b	a	c	a	c	c	a	a	c	b	a	c	b	a	c	a	
2	Mr.S.K.Samuthirar aj	61	M	L01863	Madumegaviran am/kuruthiazhal	2	6	22	KP	c	c	c	b	c	b	3	1	0	0	0	2	c	c	c	c	c	c	c	c	c	b	a	c	b	a	c	c	c	c	c	c	b	a	c	a
3	Mr.T.Gopal	65	M	K99392	Azhakkeelvayu/P V(Lt)	16	13	1	VP	b	b	a	b	a	b	3	1	0	0	0	0	a	b	c	b	a	a	a	b	a	a	b	a	c	a	a	a	b	a	a	a	a	b	b	
4	Mr.Robin.S	30	M	K83037	Thandagavatham	10	14	6	PV	c	b	c	b	b	b	3	2	0	0	0	1	c	a	c	a	c	a	b	a	a	c	b	b	a	b	a	b	a	b	a	b	a	b		
5	Mr.Kavirasan.D	22	M	L04619	Thandagavatham	11	14	5	PV	b	c	a	b	a	a	3	0	0	1	0	2	b	c	b	b	b	c	b	a	b	a	b	a	b	a	a	b	a	b	a	b	b	a		
6	Mrs.M.Arokiyarnary	61	F	K97944	Pakkavatham(Rt) /kuruthiazhal/rudr arogam	10	19	0	PV	a	b	a	b	b	a	0	0	0	0	0	0	b	a	b	a	b	b	b	b	a	b	a	a	a	a	b	b	a	b	b	b	b	b		
7	Mrs.M.Dhamayant hi	62	F	H17355	Thandagavatham	10	17	3	PV	a	b	b	b	b	b	3	0	0	2	0	1	b	a	c	b	b	b	c	b	b	b	b	c	a	a	b	a	b	a	a	b	a	a	c	
8	Mrs.Chandra.J	70	F	G57755	Azhakkeelvayu	2	7	21	KP	c	c	c	b	b	b	1	3	0	0	0	2	c	c	c	c	c	b	c	c	b	c	c	c	c	c	c	c	b	c	a	c	c	b	a	
9	Mr.M.Venkatesan	52	M	K69432	Thadiipukuttam/ Azhakkeelvay/M	9	18	2	PV	b	b	a	b	b	b	3	0	0	2	0	1	b	b	c	c	a	a	b	b	b	b	a	a	a	c	b	a	b	a	a	b	a	b	a	
10	Mrs.M.Saraswathy	44	F	L11386	Kumbavatham	7	19	4	PV	c	b	b	b	b	b	3	1	0	0	0	0	b	b	b	b	a	b	b	c	c	b	a	a	a	b	a	b	a	b	a	a	b	b	c	
11	Mrs.Selvan.A	54	F	L02364	Thandagavatham	8	10	12	KP	a	b	c	b	c	b	3	2	0	0	0	0	a	a	b	b	b	a	a	c	b	a	c	b	c	c	b	a	c	c	a	c	b	a	a	
12	Mrs.U.Sumathi	32	F	IP-1722	Valiazhakkeelvay u	10	16	4	PV	a	c	a	b	c	b	3	2	0	1	0	0	a	a	b	b	b	a	c	b	a	b	b	b	b	b	a	b	a	c	a	b	a	b		
13	Mrs.R.Parijatham	65	F	IP-1813	Azhakkeelvayu/M antham	4	6	20	KP	c	b	c	b	c	b	3	0	0	1	0	2	c	b	c	c	c	c	c	c	c	b	c	c	c	c	c	a	c	c	a	a	c	c	c	
14	Mrs.S.Pandimeena	41	F	K92826	Kumbavatham/A zhakkeelvayu	9	13	6	PV	b	b	a	b	b	b	1	2	0	0	0	3	a	a	b	a	a	a	c	c	c	b	c	c	c	c	a	b	b	c	a	a	b	b	b	
15	Mrs.G.Mohana	45	F	L05240	Kumbavatham	6	8	15	KP	c	c	b	b	c	b	0	0	0	0	0	0	c	a	c	c	b	b	c	a	b	c	c	c	c	a	a	c	a	b	c	a	c	b	a	
16	Mr.B.Devaraj	40	M	L11466	Thandagavatham	4	18	8	PK	a	b	a	b	b	b	1	0	0	0	0	3	b	b	b	b	a	c	a	b	b	c	c	c	c	b	c	b	b	b	b	b	b	b	a	
17	Mr.Ranjithkumar.N	21	M	K98913	Moolam	4	21	5	PK	a	c	c	b	b	b	0	1	0	0	0	3	c	c	b	b	b	a	b	b	b	b	b	b	b	c	b	a	a	b	a	b	b	b	b	

CTRI Number	CTRI/2018/05/013630 [Registered on: 03/05/2018] - Trial Registered Prospectively
Last Modified On	24/04/2018
Post Graduate Thesis	Yes
Type of Trial	Observational
Type of Study	Cross Sectional Study
Study Design	Single Arm Trial
Public Title of Study	Standardization of Temperament in Siddha system.
Scientific Title of Study	Evaluation and Standardization of Udal Ilakkanam based on Siddha concepts.
Secondary IDs if Any	<div> <div>Secondary ID</div> <div>Identifier</div> </div> <div>NIL</div>
Details of Principal Investigator or overall Trial Coordinator (multi-center study)	<div> <div> NameKALANIDHI D</div> <div> DesignationPG SCHOLAR</div> <div> AffiliationNATIONAL INSTITUTE OF SIDDHA</div> <div> AddressNATIONAL INSTITUTE OF SIDDHA TAMBARAM SANATORIUM CHENNAI 47 NATIONAL INSTITUTE OF SIDDHA TAMBARAM SANATORIUM CHENNAI 47 SANATORIUM CHENNAI 47</div> <div> IndiaTAMIL NADU600047</div> </div> <div> Phone9446530238</div> <div> Fax</div> <div> Emailkalanidhi900@gmail.com</div>



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<b>Name</b>		National Institute of Siddha		<b>Address</b>	
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		Research institution and hospital			
<b>Details of Secondary Sponsor</b>					
<b>Name</b>		NIL		<b>Address</b>	
		NIL			
<b>Countries of Recruitment</b>					
List of Countries					
India					
<b>Sites of Study</b>					
<b>Name of Principal Investigator</b>		KALANIDHI D			
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		TAMIL NADU Chennai			
<b>Details of Ethics Committee</b>					
<b>Name of Committee</b>		Approval Status		<b>Date of Approval</b>	
INSTITUTIONAL ETHICAL COMMITTEE		Approved		22/11/2017	
				No	
<b>Regulatory Clearance</b>					
<b>Status from DCGI</b>		Not Applicable		<b>Date</b>	
				No Date Specified	
<b>Health Condition / Problems Studied</b>		Intervention / Comparator Agent		<b>Health Type</b>	
				Condition	
		Patients		No specific condition	
<b>Inclusion Criteria</b>					
<b>Age From</b>		20.00 Year(s)		<b>Age To</b>	
		70.00 Year(s)		<b>Gender</b>	
		Both		<b>Details</b>	
		Healthy volunteers		NIS OPD and IPD patients	
<b>Exclusion Criteria</b>					
<b>Details</b>		Mentally retarded patients		Vulnerable groups	
		Severely ill patients			
<b>Method of Generating Random Sequence</b>					
Method of Concealment					
Blinding/Masking					
<b>Primary Outcome</b>					
<b>Outcome</b>		Observation and documentation of types of Udal			
<b>Timepoints</b>		1) preparation of questionnaire on udal ilakkanam based on siddha literature as the first step.			
2) categorisation of patients based on prepared					

<div> <div>Secondary Outcome</div> <div>Target Sample Size</div> <div>Phase of Trial</div> <div>Date of First Enrollment (India)</div> <div>Date of First Enrollment (Global)</div> <div>Estimated Duration of Trial</div> <div>Recruitment Status of Trial (Global)</div> <div>Recruitment Status of Trial (India)</div> <div>Publication Details</div> <div>Brief Summary</div> </div>	<div> <div>questionnaire during the study period</div> <div>3)confirmation of udal ilakkanam on specific patients at the end of the study</div> </div>		<div> <div>Outcome</div> <div>Development of scoring method for Udal ilakkanam characterisation .</div> </div>		<div> <div>Timepoints</div> <div>Development of scoring method for Udal ilakkanam characterisation</div> </div>	<div> <div>Total Sample Size=300</div> <div>Sample Size from India=300</div> <div>Final Enrollment numbers achieved (Total)=Applicable only for Completed/Terminated trials</div> <div>Final Enrollment numbers achieved (India)=Applicable only for Completed/Terminated trials</div> <div>N/A</div> <div>15/05/2018</div> <div>No Date Specified</div> <div>Years=1</div> <div>Months=3</div> <div>Days=0</div> <div>Not Applicable</div> <div>Not Yet Recruiting</div> <div>None yet</div> </div>	<div> <div>Back ground</div> <div> <p>According to the Siddha system, every individual is born with his/her own basic physical and mental constitution termed as Udalini. udalini of a person which is capable of providing a fair indication of physical strengths and weakness, mental tendencies and susceptibility to illness of various types. The humour which is predominantly present during the fusion of sukkilam and suronitham (Karv urpathi) determines the dhegi of that particular individual. Generally Vatha udaliman, Pitha udaliman and Kappha udaliman are called as Thooaya udalinar and combination of mukutra udalinar are called as kalappu udalinar for all practical purposes.</p> <p>Udalinar or prakruthi examination is obviously non costly and helps one to know oneself better and live a healthy and peaceful life. It helps to prevent diseases that are susceptible for a particular Udalinar there by changing the life style and dietary regimen. In this study it is to be attempted to validate the clarifications of Udalinar explained in the literature through the NIS OPD patients and healthy volunteers with reference to the complaints and conditions presented by them to their Udalinar characteristics.</p> </div> </div>	
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<p><b>Aim</b></p> <p>Determination of exact Udallian type in present day patients body constitutions.</p> <p><b>Objectives</b></p> <p>1) Primary objective</p> <p>To carry out an open study of Udallian characterisation using sage Yugi's concept in patients visiting at NIS OPD and IPD and in healthy volunteers</p> <p>2) Secondary objective</p> <p>To develop and standardize Udallian characterisation questionnaire based on statistical method.</p>	
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